FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUI	MENT # H8831	9				
1. Corporation Name A-C.O.D. PAWN SHOP, INC.						
A-C.U.D.	PAWN SHUP, INC.			1 (4010) han 1010 (1000 110) 110 (101) 610) 610) 610)	NI EIGH N(NI: 186)	
		14-35- Address			()	
Principal Place of Business Mailing Address						
3575 DAVIE BLVD. 3575 DAVIE BLVD. FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 33312						
FI. LAUDENDAL	E FL 33312	FI. ENODERIONEE TE 33312		DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualifed	-	
				12/05/1985		
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-2620457	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		F Cortificate of Status Desired	5 Additional	
22		27			Required	
City & State	e	City & State			00 May Be ed to Fees	
23 Zin	Country	Zip	Country	8. This corporation owes the current year Intangible	22 10 1 003	
Zip	25	29 30	¬ ′	Personal Property Tax.	□No	
24	9. Name and Address of Curre	<u>. </u>		10. Name and Address of New Registered Agent		
			81 Name	1 1100in(n=To-anh 11).	TO	
OBERLANDER, SARA			82 Streε	ddress (P.O. Box Dumber is Not Acceptate)		
3575 DAVIE BLVD.			02 Silet	3575 DAVIE BIVO.		
FT. LAUDERDALE FL 33312						
84 City				- 85 Z	in Code	
				re l'auder da le 🔝 📙 📑	3312	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
agent la	egistered agent, or both, in the State in familiar with, and accept the obliq	gations of, Section 607.0505, Florida	a Statutes.	Siziona board of directors. Thereby decept one appearance a	}	
SIGNATURE	Sall 1					
	Signature, typed or printed name of registered at	gent and title Tapplicable (NOTE: Re	gistered Agent signature re	equired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECT	TORS IN 12	
12.	D OFFICERS F	DELETE	1.1 TITLE			
NAME /	OBERLANDER, SARA		1.2 NAME	LUPPINO, JOSEPH W. ET	R.)	
STREET ADDRESS	3575 DAVIE BLVD.		1.3 STREET ADDRESS	3575 DAVIE BIVO.		
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY-ST-ZIP	Ft LAUderdale, FZ	33312	
TITLE	D	DELETE	2.1 TITLE	VP.DXihan	ge	
NAME	OBERLANDER, SARA	, ,	2.2 NAME	LUPPINO Joseph W. (JE	2.)	
STREET ADDRESS	3575 DAVIE BLVD.		2.3 STREET ADDRESS	3575 DAVIE BINH		
CITY-ST-ZIP	FT. LAUDERDALE FL		2. 4 CITY-ST-ZIP	12 LAUderdale, FZ 333	12	
TITLE	TD	☐ DELETE	3.1 TITLE	Chan	ge 🔀 Addition	
NAME	LUPPINO, JOSEPH		3.2 NAME	LUPPINO, MARGARET L.		
STREET ADDRESS	9666 OHIO PL BOCA		3.3 STREET ADDRESS	3575 DAVIE DIVO'	2212	
CITY-ST-ZIP	BOCA RATON FL		3.4. CITY-ST-ZIP	PELAUDUR dale, IL 3	3312	
TITLE	SD	DOELETE	4.1 TITLE	5D Char	ige 🔀 Addition	
NAME	NATHAN, DAVID	•	4. 2 NAME	LUPPINO, MARGARETL. 3575 DAVIE BING. FELANDRIGO E 33		
STREET ADDRESS	3575 DAVIE BLVD		4.3 STREET ADDRESS	3575 DAVIE BING-	, , ,	
CITY-ST-ZIP	FT LAUD FL	[7] pr. c.z.	4.4 CITY-ST-ZIP	FE LAUderdale, R 33	S Z ige □ Addition	
TITLE		☐ DELETE	5.1 TITLE	Ŭ Char	age Myddigoll	
NAME			5.2 NAME 5.3 STREET ADDRESS			
STREET ADDRESS			5.4 CITY-ST-ZIP			
CITY-ST-ZIP		☐ DELETE	6.1 TITLE	☐ Char	age Addition	
TITLE			_	I	1	

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

FILED

Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90100 035 ***150.00