

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H98633

FILED
Apr 23, 2004
Secretary of State

Entity Name: ANY KIND - CHECKS CASHED, INCORPORATED

Current Principal Place of Business:

4703 S. MILITARY TRAIL
SUITE A
LAKE WORTH, FL 33463 US

New Principal Place of Business:

Current Mailing Address:

4703 S. MILITARY TRAIL
#A
LAKE WORTH, FL 33463 US

New Mailing Address:

FEI Number: 59-2637217

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEASE, WILLIAM
4703 S. MILITARY TRAIL, #A
LAKE WORTH, FL 33463 US

Name and Address of New Registered Agent:

SEASE, WILLIAM
8370 WHISPERING OAKS WAY
WEST PALM BEACH, FL 33411 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: WILLIAM SEASE

04/23/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SEASE, WILLIAM,
Address: 8370 WISPERING OAK WAY
City-St-Zip: W. PALM BEACH, FL

Title: DVP () Delete
Name: SEASE, GLORIA
Address: 8510 WISPERING OAK WAY
City-St-Zip: WEST PALM BEACH, FL 33411

Title: DST () Delete
Name: SEASE, WALLACE,
Address: 8510 WISPERING OAK WAY
City-St-Zip: W. PALM BCH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM SEASE

PRES

04/23/2004

Electronic Signature of Signing Officer or Director

Date