2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2004
Secretary of State

DOCUMENT# K37418

Entity Name: MR. CHECK CASHER, INC.

Current Principal Place of Business:

11923 S.R. 574
SEFFNER, FL 33584 US

New Principal Place of Business:

Current Mailing Address:

% MICHAEL CASAGRANDE
2803 FOUNTAIN BLVD.
TAMPA, FL 33609

New Mailing Address:

FEI Number: 59-2912964 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CASAGRANDE, MICHAEL
11823 SR 5TH
SEFFNER, FL 33584

Name and Address of New Registered Agent:

CASAGRANDE, MICHAEL
11923 SR 574
SEFFNER, FL 33584

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: _____ 07/12/2004
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: CASAGRANDE, PIERRE,
Address: 118 PHILLIPS DR
City-St-Zip: SEFFNER, FL

Title: D ( ) Delete
Name: CASAGRANDE, MICHAEL,
Address: 2803 FOUNTAIN BLVD.
City-St-Zip: TAMPA, FL

Title: T ( ) Delete
Name: CASAGRANDE, JOSETTE,
Address: 118 PHILLIPS DR
City-St-Zip: SEFFNER, FL

Title: S ( ) Delete
Name: DE LA FUENTE, ANNE
Address: 4022 LAKE DR
City-St-Zip: SEFFNER, FL 33584

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:

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: CASAGRANDE, MICHAEL D 07/12/2004
Electronic Signature of Signing Officer or Director — Date