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Apr 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L56027 (0)

1. Corporation Name

MIAMI MONEY STORE, INC.

Principal Place of Business

55 N.E. 1st St.
Miami, FL 33132-2428

Mailing Address

55 N.E. 1st St.
Miami, FL 33132-2428

2. Principal Place of Business

21 55 N.E. 1st St.

Suite, Apt. #, etc.

22 Suite 1

City & State

23 Miami, FL

Zip

24 33132

Country

25 Dade

2a. Mailing Address

26 55 N.E. 1st St.

Suite, Apt. #, etc.

27 Suite 1

City & State

28 Miami, FL

Zip

29 33132

Country

30 Dade

3. Date Incorporated or Qualified

3/6/1990

3a. Date of Last Report

4/25/96

4. FEI Number

65-0173737

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

KOVACS, GEORGE
55 N.E. 1st Street
Miami, FL 33132

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DS ☐ DELETE

NAME KOVACS, GEORGE

STREET ADDRESS 55 N.E. 1st St. Suite 1

CITY, ST, ZIP Miami, FL

TITLE DP ☐ DELETE

NAME WEINBERG, JAY

STREET ADDRESS 55 N.E. 1st St. Suite 1

CITY, ST, ZIP Miami, FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY, ST, ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY, ST, ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY, ST, ZIP

900002158579

-04/29/97--01076--031

***165.00

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE KOVACS

4/23/97

Date

(305) 530-1550

Daytime Phone

CR2E034 (9/96)