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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L81990

(8)

Mailing Address

QUICK & EASY CASH, CORP.

Jan 28 1997 8:00am Secretary of State

11011 12			ш		IRKI OLBI	11111	

11452 QUAIL (MIAMI FL 3315			11452 QUAIL ROOST DRIVE MIAMI FL 33157-6546							
							3. Date Incorporated or Qualified 06/11/1990		te of Last R 25/1996	leport
	Sace of Business	}····1	2a. Mailing Address				4, FEI Number 65-0204286		<u> </u>	oplied For
Suite, Apt	# etc	 	26 Suite, Apt. #, etc.				00-0204200			ot Applicable Additional
22	,	27				5. Certificate of Status Desired			equired	
City & Stat		28	lity & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Z(p)	Country 25	29	ip	Country 30	y		8. This corporation has liability for in Florida Statutes	ntangible Yes [. 199.032,
=-	9. Name and Address of		red Agent	100			10. Name and Address of New Re			
	NCHEZ, ISABELLE			81		Name				
11452 QUAIL ROOST DR					+	Street Add	dress (P.O. Box Number is Not Acceptab	le)		
MIA	MI FL 33157			83	+					
				84	-	City		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections	s 607.0502 and 607	.1508, Florida Stati	utes, the abov	e-	named co	rporation submits this statement for the p	urpose of	changing i	ts registered
office or i agent La	registored agent, or both, in am farm ar with, and accept	the State of Florida. the obligations of, S	. Such change was Section 607.0505, F	s authorized b Florida Statute	yt S.	ine corpora	ation's board of directors. I hereby accep	it the app	oiniment as	registered
SIGNATURE										
	Styriatine, type that printed name of n				ent	signature req	uired when reinstating)	DATE	DIDECTOR	30.411.40
12.		DERS AND DIRECTO NESIDEN		13. 11 TITLE		· ·	ADDITIONS/CHANGES TO OFFIC	EHS AND	Change	Addition
NAME	SANCHEZ, HILARIO	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Lad Occess	1.2 NAME				-	o.age	. Common
STREET ADORESS	13752 SW 152 STREE	T		1.3 STREE		DDRESS				
CHY-ST-7IP	MIAMI FL 33177			1.4 CITY - 3	ST-	ZIP				
TITLE		behint	☐ DELET€	2.1 TITLE					☐ Change	Addition
NAME	SANCHEZ, ISABELLE	_		2 2 NAME						
STREET ADDRESS	13752 SW 152 STREE	T		2 3 STREE	T A	ODRESS				
C(Tr - S* - Z)P	MIAMI FL 33177		DELETE	2. 4 CITY -	ST	- ZIP	· · · · · · · · · · · · · · · · · · ·		Change	Addition
TITLE	}		[] OFFER	31 TITLE 32 NAME			1		CT CHAIRGE	L Addition
NAME STREET ADDRESS				3.3 STREE		nnares	:			
City S*-ZIP				3.4. CITY-						
THLE			☐ DELETE	4.1 TITLE	-				Change	Addition
NAME				4. 2 NAME						
STREET ADDRESS				4.3 STREE	ŦΑ	DDRESS				
CITY-ST-7IP	_			4.4 CITY - 1	\$1-	ZIP				
TITLE			☐ DELETE	5.1 TITLE					L Change	Addition
NAME				5.2 NAME						
STHEFT ADDRESS				5.3 STREE						
CHY-ST-7IP TITLE			DELETE	5.4 CITY - : 6.1 TITLE	51-	- ZIP			Change	Addition
NAMI			C) beer it	6.2 NAME			·			
STREET ALONESS				6.3 STREE		DDRESS				
CITY-ST-ZIP				6.4 CITY -						

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 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/97 (3.05) 25

PACEGAR