**PROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

**DOCUMENT #** 

Corporation Name

L96568

(5)

TONYS PAWN SHOP, INC.

APPROVED AND FILED

96 JAN 23 AM 9: 46

SECRETARY OF STATE TALLAHASSEE. FLORIDA



dba THE JEWELRY'S PALACE									
Principal Place of Business  2960 W. 68TH ST. STE. 119		Mailing Address 2360 W. 66TH ST. STE. 119							
HIALEAH FL US	33016	HIALEAH FL 33016 US				3. Date incorporated or Qualified 08/27/1990	3a. Date of L	21/1995	
2. Principal Plac	e of Business	2a. Mailing Address 26				4, FEI Number 65-0210854			
Suite, Apt. #,	elc.	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required Fee Required				
City & State		City & State	City & State			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees			
Zip Country		Zıp	Zip Country			This corporation has liability for intangible tax under s 199.032,     Florida Statutes			
4	g. Name and Address of Curren	t Registered Agent				10. Name and Address of New R	egistered Age	nt	
			81	Ī	Name	-			
CALVO, FRANCISCO 2225 S.W. 83RD COURT				2 :	Street Addre	t Address (P.O. Box Number is Not Acceptable)			
	FL 33155		83	3					
			84	1	City	FL 85 Zip Code			
12. TITLE NAME STREET ADDRESS	PSTD CALVO, FRANCISCO 2225 S.W. 83RD COURT	D DIRECTORS  DELETE	1.2 NA <del>M</del>	1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS		-02/06	°ם <b>17 001</b> 7/	hange Addition	
CHY-ST ZIP	MAMI FL 33155 XXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXX	☐ DELETE	1 4 C/TY-1 DELETE 2 1 T/TLE 2 2 NAME		VI	P/VS/D ALVO, ANN		thange Addition	
STREET ADDRESS	XAMEODA DURK YANG SARREY		23STRE	23 STREET ADDRESS 2		2225 S.W. 83rd CT. Miami, Fl. 33155			
THEF STADDRESS		DETELE	3 1 TITL 32 NAM 33 STR	E E EET A	ADDRESS			Change Addition	
CHY-SI-ZIP TULE NAME STREET ADDRESS		☐ DELETE	3 4 CITY 4. 1 TITE 4.2 NAM 4.3 STRE	.E IE	-ZIP ADDRESS			Change 🔲 Addition	
CHY-ST-ZIP THE NAME STREET ADDRESS		☐ DELETE	5 1 TITU 5 2 NAM 5 3 STRI	.E IE	-ZIP ADDRESS			Change Addition	
CHY-ST-ZIF THEF NAME		☐ DELETE	5 4 CITY 6 1 TITU 6 2 NAM	LE	- ZIP			Change Addition	
STREE! ADDRESS ONLY ST-ZIP		il this Eliza is vehicle; for	6.4 C(T)	Y - ST		for the exemption stated in Section 11	9 07(3)(k). Florid	AU a Statutes, I further	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Floricla 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 logal 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:

Francisco
FRINTED NAME OF SIGNING OFFICER OR DIRECTOR Francisco Calvo

1-18-96 (305) 828-5302 Date Date Destine Proce 1