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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # M07940

EL TESORO PAWN SHOP INC.

Principal Place		Mailing Address					
8391 S.W. 40 ST.		8391 S.W. 40 ST.					
MIAMI FL 33155	•	MIAMI FL 33155			DO NOT WRITE IN T	HIS SPACE	
					3. Date Incorporated or Qualifed		
					11/19/1984		}
					4. FEI Number	Applie	d For
2. Principal Pla	ce of Business	2a. Mailing Address	la. Mailing Address				pplicable
_		26			59-2465402	\$8.75 Add	<del></del>
Suite, Apt. #	etc	Suite, Apt. #, et	ic.		5. Certificate of Status Desired	Fee Requi	
	, etc.	27			\		
22		City & State			6. Election Campaign Financing	\$5.00 Ma	
City & State	•	28			Trust Fund Contribution	Added to F	ees
23	Country	Zip	Cou	ntry	8. This corporation owes the current year	r Intangible	
Zip	_ ` `	29	30		Personal Property Tax.		No
24	9. Name and Address of Curre				10. Name and Address of New Registe	red Agent	
	9. Name and Address of Curre	It Kegistered Agein		81 Name	<del></del>		
COV	ENRIQUE J	**************************************		<u> </u>	(T. C. D. Attention Not Accountable)		
CO1,	SW 40TH OF ST			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	garaga sang a kanan <b>kan</b> katang	
				83			1個問題
MIAM	11 FL 33155			93	人名德勒拉拉伊尔 经基础条件	机结构 计编制分别 为	1. 特别機器
				84 City	- The state of the	<b>85</b> Zip Co	de
•				\		no of changing its re	gistered
44 10 20 20	to the provisions of Sections 607.05	02 and 607 1508, Florida	a Statutes, the a	bove-named corp	poration submits this statement for the purposion's board of directors. I hereby accept the a	appointment as regis	tered
office or re	egistered agent, or both, in the State	e of Florida. Such change	e was authorized	g by the corporali hites.	long board of directorer twee any	•	
∎agent. I ar	egistered agent, or both, in the State of familiar with, and accept the oblig	jations of, Section 607.00	,00, 1 londa 012.				\
SIGNATURE		Livia is antiochlo	(NOTE: Registered	d Agent signature require	ed when reinstating)		
	Signature, typed or printed name of registered at	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTOR	S IN 12
12.		DEL	LETE 1.1 T	TILE	16. 2 K 2 Th	Change	☐ Addition
TITLE	PSTD			NAME	7		ļ
NAME	COY, LILLIANA			STREET ADDRESS			
STREET ADDRESS	13223 SW 13TH ST		1.0 0	SINCE I ADDINEGO			
CITY-ST-ZIP				1-D1 DT 71D			
i (111-01-41	MIAMI FL 33184			CITY-ST-ZIP		Change	☐ Addition
TITLE	MIAMI FL 33184	□ DE	LETE 2.11	INTE		Change	☐ Addition
TITLE	MIAMI FL 33184	□ DE	LETE 2.11 2.21	TITLE NAME		☐ Change	Addition
TITLE NAME		DE≀	LETE 2.11 2.21	INTE		. Change	☐ Addition
TITLE NAME STREET ADDRESS			LETE 2.1 T 2.2 N 2.3 S	TITLE NAME			
TITLE NAME STREET ADDRESS CITY-ST-ZIP.		☐ DE(	LETE 2.11 2.21 2.33 2.4	TITLE NAME STREET ADDRESS		☐ Change	Addition Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP.  TITLE  CO'		\$1°:	2.11 2.21 2.33 2.4 3.1	NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP.		\$1°:	211 221 233 24 24 24 31 32	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP.  TITLE  CO'		\$1°:	211 228 233 2.4 3.1 3.2 3.3	ITTLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME		<u>₹,1':</u> □ <b>DE</b>	211 221 233 2.4 3.1 3.2 3.3 3.4	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		\$1°:	211 228 233 2.4 3.1 3.2 3.3 3.4 ELETE 4.1	ITTLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS .CITY-ST-ZIP TITLE		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		<u>₹,1':</u> □ <b>DE</b>	211 228 233 2.4 3.1 3.2 3.3 3.4 ELETE 4.1	ITTLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS .CITY-ST-ZIP TITLE P. NAME		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP. TITLE NAME TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP	ENHANCE AND THE SECOND	DE DE	211 228 233 24 31 321 333 34 ELETE 4.1 4.2	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS		☐ Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS  CITY-ST-ZIP	ENHANCE AND THE SECOND	College Colle	21T 22F 23S 2.4 3.1 3.3 3.4 5.1 ELETE 4.1 4.2 4.3 4.4	ITILE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS .CITY-ST-ZIP TITLE P. NAME STREET ADDRESS CITY-ST-ZIP CONTROL OF THE CONTROL OF T		Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP	ENHANCE AND THE SECOND	College Colle	21T 22F 23S 2.4 3.1 3.3 3.4 5.1 ELETE 4.1 4.2 4.3 4.4 ELETE 5.1	ITILE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE P. NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	ENHANCE AND THE SECOND	College Colle	211 228 233 24 31 32  33 34 ELETE 4.1 4.2 4.3 4.4 ELETE 5.1 52	ITILE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE P. NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE NAME NAME	· 在联联系统	Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME  NAME  NAME  NAME  NAME	STANDONE OF THE STANDONE OF TH	College Colle	211 228 233 24 31 32  33 34 ELETE 4.1 4.2 4.3 4.4 ELETE 5.1 52	ITILE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE P. NAME STREET ADDRESS CITY-ST-ZIP TITLE		Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP.  TITLE  NAME  TYP-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	ELL COM	College Colle	LETE 2.11 2.28 2.33 2.4 3.1 3.21 3.3 3.4 ELETE 4.1 4.2 4.3 4.4 ELETE 5.1 5.2	ITILE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE P. NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE NAME NAME		Change	Addition Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	PSTC	(1) DE DE DE COMPANY (1) DE COMPANY	LETE 2.11 2.28 2.3 2.4 3.1 3.2 3.3 3.4 ELETE 4.1 4.2 4.3 4.4 ELETE 5.1 5.2 5.3 5.4	ITTLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE P. NAME STREET ADDRESS CITY-ST-ZIP TITLE INAME INAME STREET ADDRESS CITY-ST-ZIP TITLE INAME INAME INAME INAME INAME INAME		Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP.  TITLE  NAME  TYP-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	S PSTO	(1) DE DE DE COMPANY (1) DE COMPANY	LETE 2.11 2.28 2.33 2.4 3.1 3.21 3.3 3.4 5LETE 4.1 4.2 4.3 4.4 5LETE 5.1 5.2 5.3 5.4 6.16	ITTLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE P. NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		Change	Addition Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	S PSTO	(1) DE DE DE COMPANY (1) DE COMPANY	LETE 2.11 2.28 2.3 2.4 3.1 3.2 3.3 3.4 ELETE 4.1 4.2 4.3 4.4 ELETE 5.1 5.2 5.3 5.4 ELETE 6.1	ITTLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE 2 NAME		Change	Addition Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP.  TITLE  NAME  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	# 22 T - A - A - A - A - A - A - A - A -	(1) DE DE DE COMPANY (1) DE COMPANY	LETE 2.11 2.28 2.3 2.4 3.1 3.2 3.3 3.4 5LETE 4.1 4.2 4.3 4.4 5LETE 5.1 5.2 5.3 5.4 5LETE 6.1 6.2	ITTLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS .CITY-ST-ZIP TITLE P. NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME INAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	Addition Addition

14. I 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, with all other like empowered.

SIGNATURE

**FILED** 

Feb 06, 1999 8:00am

**Secretary of State** 

02-06-1999 90032 017 \*\*\*150.00