## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

HIALEAH FL 33012

DOCUMENT #

M13530

HIALEAH FL 33012

U.S.A. MONEY CENTER, INC.

Principal Place of Business Mailing Address 4445 W 16TH AVE. 3RD FLOOR 4445 W 16TH AVE. 3RD FLOOR



						<ol> <li>Date Incorporated or Qualified 04/03/1985</li> </ol>	3a. Date	of Last Re	•
2. Principal Piac	ce of Business	2a, Mailing Addres	s			4. FEI Number		1	Applied For
21		26				59-2546936			Not Applicable
	Suite, Apt. #, etc.         Suite, Apt.           2         27			#, etc.		5, Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State City & State					6. Election Campaign Financing Trust Fund Contribution  \$5.00 May B Added to Fees			
Ζιρ <b>24</b>	Country 25	Z <sub>I</sub> p [29]	30	untry		8. This corporation has liability for in Florida Statutes Yes			
	9. Name and Address of Cu	rrent Registered Agent		T		10. Name and Address of New R	egistered A	gent	
				81	Name				
DANIELS, DANNY 4445 W. 16TH AVENUE, 3RD FLOOR HIALEAH FL 33012				82 Street Address (P.O. Box Number is Not Acceptable)					
				63	3				
TINCLN	WITE 03012			84	City			85 Zı	p Code
				11			<u> </u>	$\perp \perp \perp$	
<ol> <li>Pursuant to or registered</li> </ol>	the provisions of Sections 607.0 agent, or both, in the State of J	9502 and 607.1508, Florida ( Elonda, Such change was au	Statutes, the abo thorized by the	ove-r	named corpora oration's boar	ation submits this statement for the pured of directors. Thereby accept the appoint	rpose of cha	nging its r registered	egistered office agent. Lam
familiar with	n, and accept the obligations of, (	Section 607 0505, Florida St	atutes.	то.р	0.00.00	rd of directors. I hereby accept the appoint		~) <i>x</i>	agom. rum
SIGNATURE							52-	16	
SI	Signature, by ed or printed name of registered	Spread in this if applicable	(NOTE: Registere	d Ager	it signature required		DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	<del></del>		
TIJLE	PST	DELET	1.1	TITLE			L	Change	Addition
NAME	Daniels, Danny		1.2 N	IAME					
STREET ADDRESS	4445 W. 16TH AVE., 3R	D FLOOR	1.3 9	STREET	ADDRESS				
Cith - ST - ZiP	HIALEAH FL 33012		1.4 0	OTY-S	ST - ZIP				
THE	D	☐ DELET	£ 2.1	TITLE				Change	☐ Addition
			221	IAME			_	•	
i	DANIFI S DANNY								
NAME	DANIELS, DANNY 4445 W 16TH AVE 3B	n floor			Annesss				
NAME STREET ADDRESS	4445 W. 16TH AVE., 3R	D FLOOR	235	STREET	ADDRESS				
NAME STREET ADDRESS CHY SE-ZIP			235 240	STREET CHTY - S				7 Change	- Addition
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NAME STREET ADDRESS CHY, ST-ZIP TITLE NAME	4445 W. 16TH AVE., 3R		235 240 E 31	STREET CHTY - S TITLE NAME	ST - ZIP		C	] Change	☐ Addition
MAME SIREFI ADDRESS CHY SE-ZIP TITLE	4445 W. 16TH AVE., 3R		235 240 E 31	STREET CHTY - S TITLE NAME				] Change	☐ Addition
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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 ooth, 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 TYPEBOR PAINTED NAME OF SIGNING OFFICER OR DIRECTOR

/- 22-96 305-875-6100