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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M24760

1. Corporation Name

	Y PAWN SHOP INC.				
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		* .			
Principal Plac	ce of Business	Mailing Address			
1531 S. STATE		1531 S.STATE RD 7			
FT. LAUD FL (33317	FT. LAUD FL 33317			
US		US	•	DO NOT WRITE IN TH	IIS SPACE
		•		3. Date Incorporated or Qualifed	
2 Principal C	Place of Business	Tan Mailing Addrson		12/18/1985	
—	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt	# ata	Suite, Apt. #, etc.		59-2638698	Not Applicable
	. #, etc.			5. Certifcate of Status Desired	\$8.75 Additional
City & Sta	to	City & State		<u> </u>	Fee Required
23	ne in the second of the second	28	جا بيا تا يا جا <u>ث</u>	6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	8. This corporation owes the current year	Intangible ☑ Yes □ No
24	9. Name and Address of Current I		1301	Personal Property Tax. 10. Name and Address of New Registere	
		regiote, se rigerit	81 Name	IV. Hallo dila Addiede di Neti Negietoro	u Ayent
	IULER, LEON MICHAEL		'		<u> </u>
	1 SOUTH STATE ROAD 7		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	· -
	LAUDERDALE FL 33317		83	the state of the s	- e et Ty er eran bran zen - an - - e et Te en 1 Els elekt 1884 1884
				· 诗点,一层的文章 隐格 翻译 经收益	经出版的抵制
:			84 City	र देवें एक । ये किस्तान अक्का के जिल्ला र के	85 Zip Code
11 Pursuant	to the provisions of Sections 607.0502	and S07 1509 Florida Statut	the above named corne		L
office or r	to the provisions of Sections 607.0502 a registered agent, or both, in the State of	Florida. Such change was a	uthorized by the corporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its registered
	im familiar with, and accept the obligation				
	, ,	ns of, Section 607.0505, Flo	orida Statutes.		
SIGNATURE		ens of, Section 607.0505, Flo	orida Statutes.		
	, ,	and title if applicable. (NOTE	rida Statutes. Registered Agent signature required	d when reinstating) (c. 31-2); DATE	
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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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

95H-583-023H

FILED

Feb 02, 1999 8:00am

Secretary of State

02-02-1999 90012 024 ***150.00