2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNIN

Apr 30, 2007 8:00 am Secretary of State 04-30-2007 90420 023 ***150.00 DOCUMENT # M76903 CHECK EXPRESS FLORIDA, INC. 40089604 Principal Place of Business Mailing Address 1231 GREENWAY DRIVE 1231 GREENWAY DRIVE STE. 800 STE. 600 IRVING, TX 75038 IRVING, TX 75038 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. 04162007 CR2E034 (12/06) Chg-P City & State City & State 4. FEI Number Applied For 59-2884144 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE_ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. CDP ☐ Change ☐ Addition TITLE ☐ Delete TITLE SHIPOWITZ, JAY B NAME NAME 1 1231 GREENWAY DR., SUITE 600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **IRVING, TX 75038** CITY-ST-ZIP VTDC TITLE Delete TITLE Executive VICE President/CFD ☐ Change Addition TODO W. Whitheck 1231 Greenway Dr., Shite 600 MCCALMONT, WILLIAM S NAME NAME STREET ADDRESS 1231 GREENWAY DR STE 600 STREET ADDRESS IVMAG, TEXAS 75038 CITY-ST-ZIP CITY-ST-ZIP IRVING, TX 75038 3R. VP/ GENERAL COUNSEL/ Secretary Change VSD **⊠**Addition TITLE Delete TITLE Ted M Eades 1231 Greenway Dr. Suite 600 EVANS, WALTER 3 NAME NAME STREET ADDRESS 1231 GREENWAY DR. STE 600 STREET ADDRESS Irving, TX 75038 CITY-ST-ZIP **IRVING, TX 75038** CITY-ST-ZIP ☐ Addition Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental peopt 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 mustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachgent with an address, with all other like empowered.

CER OR DIRECTOR

FILED