2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000009016

FILED Apr 19, 2005 Secretary of State

Entity Nam	ie: National	_ PAWNBF	ROKERS INSTI	ΓUTE, INC.		•
Current Pri	incipal Place	of Busine:	ss:		New Principal Plac	ce of Business:
	SUNRISE BOI DERDALE, FL					
Current Ma	iling Address	s:			New Mailing Addre	ess:
	SUNRISE BOI DERDALE, FL					
FEI Number: (69-0012872	FEI Numbe	r Applied For()	FEI Nu	mber Not Applicable ()	Certificate of Status Desired ()
Name and	Address of Cu	urrent Reg	istered Agent:		Name and Address	of New Registered Agent:
KENO, CAF						
2000 É. SUI FORT LAUI	NRISE BLVD. DERDALE, FL	33304	US			
FORT LAUI	DERDALE, FL			ne purpose (of changing its registe	red office or registered agent, or both,
FORT LAUI	DERDALE, FL named entity su of Florida.			ne purpose d	of changing its registe	red office or registered agent, or both,
The above r in the State	DERDALE, FL named entity su of Florida. E:	ubmits this			of changing its registe	red office or registered agent, or both, Date
The above r in the State	DERDALE, FL named entity su of Florida. E:	ubmits this	statement for th			
The above r in the State	DERDALE, FL named entity st of Florida. E:Electronic AND DIRECT	ubmits this c Signature CORS:	statement for the			Date
The above r in the State SIGNATUR OFFICERS Title: Name: Address:	DERDALE, FL named entity st of Florida. E: Electronic AND DIRECT D () I KENO, CARY P.O. BOX 7045 FORT LAUDERD	ubmits this c Signature ORS: Delete OALE, FL 333 Delete RISE BOULE	statement for the of Registered and statement for the of Registered and statement for the other statement forecast for the other statement for the other statement for the oth		ADDITIONS/CHAN Title: Name: Address:	Date GES TO OFFICERS AND DIRECTORS:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARY C. KENO OFF 04/19/2005