## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P02000122798

Entity Name: OX CASH, INC

FILED Jan 24, 2003 Secretary of State

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Current Principal Place of Business:		New Prince	New Principal Place of Business:	
444 BRICKELL A MIAMI, FL 33131	VENUE SUITE 1001			
Current Mailing Address:		New Mailing Address:		
444 BRICKELL A' MIAMI, FL 33131	VENUE SUITE 1001			
FEI Number: 74-307	1649 FEI Number Applied For()	FEI Number Not App	licable ( ) Certificate of Status Desired ( )	
Name and Addre	ess of Current Registered Agent:	Name and	Address of New Registered Agent:	
SAMOLE, MYRO 9700 SOUTH DIX MIAMI, FL 33156	(IE HIGHWAY SUITE 1030			
The above named in the State of Flo		purpose of changing i	ts registered office or registered agent, or both,	
SIGNATURE:				
	Electronic Signature of Registered Ag	ent	Date	
Election Campaign	Financing Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	D ( ) Change (X) Addition DAVIS, PENN 444 BRICKELL AVE. SUITE 1001 MIAMI, FL 33131	
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	D ( ) Change (X) Addition HINSON, KRISTOPHER 444 BRICKELL AVE. SUITE 1001 MIAMI, FL 33131	
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	D ( ) Change (X) Addition ARVIN, JOSHUA 444 BRICKELL AVE. SUITE 1001 MIAMI, FL 33131	
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	D ( ) Change (X) Addition GARNER, ROBERT L 444 BRICKELL AVE. SUITE 1001 MIAMI, FL 33131	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PENN DAVIS D 01/24/2003