

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 18, 2007 8:00 am
Secretary of State

05-01-2007 90014 046 ***150.00

DOCUMENT # P05000056863

1. Entity Name
CAR PAWN, INC.



Principal Place of Business

**6269 N.W. 23RD ROAD
BOCA RATON, FL 33434**

Mailing Address

**6269 N.W. 23RD ROAD
BOCA RATON, FL 33434**

66019372



2. Principal Place of Business - No P.O. Box #
1900 Glades Road #101

3. Mailing Address
1900 Glades Road

Suite, Apt. #, etc.
Suite 401

Suite, Apt. #, etc.
Suite 401

01122007 Chg-P CR2E034 (12/06)

City & State
Boca Raton, FL

City & State
Boca Raton, FL

4. FEI Number
APPLIED FOR 26-0341190

Applied For
Not Applicable

Zip
33431

Country
US

Zip
33431

Country
US

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CARTER, DAVID A
6269 N.W. 23RD ROAD
BOCA RATON, FL 33434**

address change

only

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1900 Glades Road Suite 401

City

Boca Raton

FL

Zip Code
33431

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)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSD CARTER, DAVID A 6269 N.W. 23RD ROAD BOCA RATON, FL 33434	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

David A. Carter

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

DAVID A. CARTER, P.A.
ONE LINCOLN PLACE
1900 GLADES ROAD, SUITE 401
BOCA RATON, FLORIDA 33431

ATTACHMENT

66019372

DAVID A. CARTER*

*MEMBER FLA. AND IOWA BAR

TELEPHONE: (561) 750-6999
FACSIMILE: (561) 367-0960
EMAIL: dacpa@bellsouth.net

PRIORITY MAIL

June 13, 2007

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Car Pawn, Inc.

Number: P05000056863

Dear Sir/Madam:

Please find enclosed a copy of the 2007 for Profit Corporation Annual Report on behalf of Car Pawn, Inc. which has been updated to reflect the newly issued tax identification number. In addition, please find attached a copy of the IRS Federal Tax ID confirmation.

As always, should you have any questions or require additional information, please do not hesitate to contact our office.

Very truly yours,
DAVID A. CARTER, P.A.

By: Susan M. Massinger
Susan M. Massinger
Legal Assistant

SMM/mmi

enc.

dacpa\carpawn-florida.001

ATTACHMENT 66019372

**Internal Revenue Service**

DEPARTMENT OF THE TREASURY

The
Digital
Daily

POS 000056863

Federal Tax ID / EIN

This is your provisional Employer Identification Number:

26-0341190

Today's Date is: June 13, 2007 GMT

You will receive a confirmation letter in U.S. mail within fifteen days.
The letter will also contain useful tax information for your business or organization.

If you have input any of the information on your application in error, please wait seven days and contact the EIN Toll Free area at 1-800-829-4933, Monday - Friday, 7:30am - 5:30pm. If you do not want to call, please make corrections on the letter you receive confirming your EIN and return it to the IRS.

If you are going to complete other on-line applications that require your Employer Identification Number(EIN) you can copy it by performing the following steps:

- 1) Use your mouse to highlight your EIN (blue number on top of page) by moving your pointer on top of the number.
- 2) Press the Ctrl key at the same time pressing the C key.

Once you copy your EIN you can paste it in the appropriate place by pressing the Ctrl key at the same time pressing the V key.

You may click on the buttons below for different print options or to fill out another Form SS-4.

[Review and Print Form SS-4](#)[Fill Out Another Form SS-4](#)

[Click here to return to the Internet Employer Identification Number landing \(start\) page.](#)
