## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000141268

Entity Name: OAKLAND CHECK CASHING, INC.

FILED Feb 21, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

593 W OAKLAND PARK BLVD SUITE 593 OAKLAND PARK, FL 33311

Current Mailing Address: New Mailing Address:

593 W OAKLAND PARK BLVD SUITE 593 OAKLAND PARK, FL 33311

FEI Number: 20-5852831 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KENNY, EDWARD P

593 W OAKLAND PARK BLVD

SUITE 593

OAKLAND PARK, FL 33311 US

URBANO, KELLY E

22151 CRESSMONT PLACE

BOCA RATON, FL 33428 U

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.

SIGNATURE: MOHAMMAD HARB 02/21/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

Title: P ( ) Delete Title: P (X) Change ( ) Addition
Name: KENNY, EDWARD P Name: URBANO, KELLY E

Address: 1155 HILSBORO MILE #708 Address: 22151 CRESSMONT PLACE

 Address:
 1155 HILSBORO MILE #708
 Address:
 22151 CRESSMONT PLACE

 City-St-Zip:
 HILSBORO BEACH, FL 33062
 City-St-Zip:
 BOCA RATON, FL 33428

 Title:
 VP ( ) Delete
 Title:

 Name:
 HARB, MUHAMMAD
 Name:

 Address:
 8844 THAMES RIVER DR.
 Address:

 City-St-Zip:
 BOCA RATON, FL 33433
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: MOHAMMAD HARB VP 02/21/2007