01231999-90022-046-\$150.00-\$150.00

## FILE NOW: FILING FEE AFTER MAY 1ST-1S-\$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Jan 23, 1999 8:00 am Secretary of State

01-23-1999 90022 046 \*\*\*150.00

1	1999 DIVISION OF CORPORATION			NS	01 23 1999 30022 0 10 130.00			
DOCUMENT # P9200009504  1. Corporation Name TOD DOLLAR PAWN TOD INC.								
Principal Place of Business Mailing Address								
1321 S. DIXIE H		1321 S. DIXIE HIGHWAY POMPANO BEACH FL 33060				•		
POMPANO BEAC	CH FL 33060		COMICANA	) DEMONITE WAS	w			DO NOT WRITE IN THIS SPACE
								3. Date incorporated or Qualified
			1 4 44 10					12/04/1992 4. FEI Number Applied For
2. Principal Place of Business			2a. Mailing Address					65-0379218 Not Applicable
21 Suite Ant 4	Suite, Apt. #, etc.			Suite, Apt. #. etc.				\$8.75 Additional
22								Pae Required
City & State	City & State			City & State				6. Election Campaign Financing \$5.00 May Be
Zip		Country	Zip		Cou	intry		8. This corporation owes the current year Intangible
24	25	,	29		30			Personal Property Tax. Yes No
	9. Name and Address of Current Registered Agent						Name	10. Name and Address of New Registered Agent *
PETERSON, HENRY A						B1		
	S DIXIE HWY				82	Street A	ddress (P.O. Box Number is Not Acceptable)	
	PANO BEACH				63			
,						84	City	85 Zip Code
]	FL The second comparison the registered							
11. Pursuant	to the provision	of Sections 607.0502	and 607.15 f Florida, Su	08, Florida Statu ch change was	ites, the a autho <del>pize</del>	above ø by t	⊬named o the corpo	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
agent. I a	m fa <b>rf</b> illiar with.	and accept the obligati	ns of, Secti	i <u>on 6</u> 01\0505, Fl	oride Sta	utes.	_	1-9-99
SIGNATURE_	Signature, typed or p	nrills nume of registered signal	and title if applica	NOT	E: Regulate	d Agent	S signalure re	gured when reinstaling) DATE
12,	Signature, open or p	OFFICERS AND		रङ	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DPST			☐ DELETE		TLE	İ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
NAME	PETERSON, HENRY A					12 NAME		
STREET ADDRESS	1321 S DIXIE HWY		•		•	1.3 STREET ADDRESS		·
CITY-ST-ZP	POMPANU	POMPANO BEACH FL		DELETE 2.1TI				☐ Change ☐ Addition ☐
TITLE !				_	221	UME	<b> </b>	<b>\</b>
STREET ADDRESS					2.3 8	TREET	ADDRESS	İ
CITY-ST-ZIP	_					ary-s	T-ZIP	☐ Change ☐ Addition
TITLE		—				TTLE NAME	ļ	
NAME							ADDRESS	
STREET ADDRESS	·					CITY-S		<u></u>
CITY-ST-ZIP				☐ DELETE	_	nTLE		. Change Addition
NAME					4. 2	NAME		
STREET ADDRESS	_				4.3	STREET	ADDRESS	
CTTY-ST-ZIP				C perese		CITY-51	T-ZIP	☐ Change ☐ Addition
TITLE	1			☐ DELETE		title Name		,
NAME							ADDRESS	
STREET ADDRESS						CITY-S1	- 1	
TYLE	,			DELETE		TITLE		☐ Change ☐ Addition
NAME						NAME		
STREET ADDRESS	,						ADDRESS	
CITY-ST-ZIP					6.4	CITY-S'	T-ZIP	in Section 119.07(3)(i), Florida Statutas, I further certify that the information

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119/13(i), Florida Statutas, Florida control of the control of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and accurate and that my same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and accurate and that my name appears in 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPEGOR PRINTED HAVE OF SIGNING OFFICER OF DIRECTOR TO THE DATE OF SIGNING OFFICER OF DIRECTOR TO THE OFFICER OF THE OFFICER OF DIRECTOR TO THE OFFICER OF DIRECTOR TO THE OFFICER OF DIRECTOR TO THE OFFICER OF THE OFFICER OF DIRECTOR TO THE OFFICER OF THE OFFICER OF THE OFFICER OF THE OFFICER OF THE OFFICER OF THE OFFICER OF THE OFFICER OF THE OFFICER OF THE OFFICER OF THE OFFICER OF THE OFFICER OF THE OFFICER OF THE OFFICER OF THE OFFICER OFFICER OF THE OFFICER OF THE OFFICER OF THE OFFICER OF THE OFFICER OFFICER OFFICER OFFICER OFFICER OFFICER OFFICER OF THE OFFICER OF