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FILED
May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000028561

1. Corporation Name: MONEYLAND PAWN INC

Principal Place of Business / Mailing Address:
4306 N. ARMENIA
TAMPA FL
33607

3. Date Incorporated or Qualified: 7/94
3a. Date of Last Report:

2. Principal Place of Business — 21: 4306 N. ARMENIA
22: Suite, Apt. #, etc:
23: City & State: TAMPA FL
24: Zip: 33607 — 25: Country: HILLSBOROUGH

2a. Mailing Address — 26: 4306 N. ARMENIA
27: Suite, Apt #, etc:
28: City & State: TAMPA FL
29: Zip: 33607 — 30: Country: HILLSBOROUGH

4. FEI Number: 59-3211449 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent:
Rodney Faucher
~~4306 N. ARMENIA~~ 3114 SAMARA DR
~~TAMPA FL 33607~~ TAMPA FL 33618

10. Name and Address of New Registered Agent
81 Name: PAUL PARSONS
82 Street Address (P.O. Box Number is Not Acceptable): 1873 Balboa Lane
83:
84 City: CLEARWATER — FL — 85 Zip Code: 33860

11. Pursuant to the provisions of Section 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Paul Parsons (Signature of president or registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ DELETE: Rodney Faucher, 1406 N. Armenia, Tampa FL 33607	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☐ Change ☑ Addition: ~~PAUL PARSONS~~ Director, PAUL PARSONS, 4306 N. ARMENIA, TAMPA FL 33607
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	☐ Change ☑ Addition: ADRIANE HARRIS, Director, 4306 N. ARMENIA, TAMPA FL 33607
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

PW 5-6-97

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14. I (We) hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or 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 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.

SIGNATURE: Paul Parsons
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #