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CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED
95 MAR 31 PM 1:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000030375 (7)**

1. Corporation Name
E M CASH & CHECK CORP.

Principal Place of Business	Mailing Address
5714 S.W. 37TH STREET HOLLYWOOD FL 33023	5714 S.W. 37TH STREET HOLLYWOOD FL 33023

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/21/1994
3a. Date of Last Report: N/A

2. Principal Place of Business	2a. Mailing Address
21 1157 NW 22 AVE	26 1157 NW 22 AVE
22 Suite, Apt. #, etc	27 Suite, Apt. #, etc
23 City & State: MIAMI FL	28 City & State: MIAMI Florida
24 Zip: 33125 25 Country: DADE	29 Zip: 33125 30 Country: DADE

4. FEI Number: 65-0486195 ☐ 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

8. This corporation has liability for intangible tax under s. 199.052, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

GUTIERREZ, EDEL
5714 S.W. 37TH ST.
HOLLYWOOD FL 33023

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 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: X Edel Gutierrez — DATE: 1/18/95
(Signature, typed or printed name of individual with authority to execute) (NOTE: Registered Agent signature required when mandatory)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	President Edel Gutierrez 5714 SW 37 ST Hollywood FL 33023	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	Vice-President Joao Gutierrez 5714 SW 37 ST Hollywood FL 33023	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	Share Holder Nereyda Gutierrez 5714 SW 37 ST Hollywood FL 33023	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	Share Holder Mayrene Hernandes 1100 SW 32 ST Ft Laud. 33315	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY ST ZIP	☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: X Edel Gutierrez
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR

1/18/95 (305) 644-2256
Date / Daytime Phone #

0423302 FP