ECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000041735

LABELLE PAWN, INC.

## **FILED** Jul 08, 1999 8:00 am Secretary of State

07-08-1999 90034 050 \*\*\*550.00



Principal Place of Business	Mailing Address			* (BE ((BE) ((B ) NE))	BSIL BBILL BBILL BI			
302 HWY 80	P.O. BOX 22							
P.O. BOX 22	LABELLE FL 33935							
LABELLE FL 33935				DO NOT WRIT	TE IN THIS SE	PACE		
STEELE TE TOTAL				3. Date Incorporated or Qualified				
	·			06/03/1994				
. Principal Place of Business	2a. Mailing Address			4. FEI Number		L A	pplied For	
1	26			65-0495011		N	ot Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	<del>-</del>	-			\$8.75	Additional	
Coulte, April #, oto.	27		<del></del>	5. Certificate of Status Desired			equired	
City & State	City & State			6. Election Campaign Financing		\$5.00	May Be	
	28			Trust Fund Contribution	$\Box$	Added	to Fees	
Zip Country	Zip	Cot	untry	8. This corporation owes the curre	ent year			
J	29	30	·	Intangible Personal Property.	F1	Yes [	DN₀	
		130	1	10. Name and Address of New R	egistered Ac			
9. Name and Address of	Current Registered Agent	·	81 Name	To. Harre and Harrest V. Nov.		,		
• .			Name					
RUMFELT, ALDEN A			82 Street Add	dress (P.O. Box Number is Not Accepta	ible)			
1017 PONCE DE LEON AVE			Jan Silver Add	Office Addition (1.0. DOX Harrison in Hot Accordance)				
PO BOX 37			83					
CLEWISTON FL 33440			[ ]					
CLEMOTOR 1 E COTTO			84 City			85 Zip	Code	
			[ ] - 7		FL			
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an officer or director of the exponation by 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 chapted, or the control of the receiver of the control of the

SIGNATURE:

GNATU<u>RE REQUIRED</u>