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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400046527 (5)

SOUTH DIXIE CHECK CASHIER'S, INC. NO. 2

## FILED Mar 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						I reblinkt lin iziri didil daril baril baril baril baril baril bring didin bring mila irari ibar ibar	
451 \$ DIXIE HWY Miami FL 33146		MIAMI FL 33146				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified 06/22/1994	
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For	
21		26				<b>65-0489790</b> Not Applicable	
Suite, Apt.	#, <b>e</b> 1c.	Suite, Ap	Suite, Apt. #, etc.			5. Certificate of Status Desired  \$8.75 Additional	
22		27				Fee Required	
City & State	Ð	City & Sta	City & State			Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution	
Zip	Country	Zip	<u> </u>	Country		8. This corporation owes or has paid the current year Intangible	
24	25	29	30	J		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent	
9. Name and Address of Current Registered Agent					Name	10. Name and Address of New Negroted Agent	
LUNDSTROM, DAVID			81 Name		I Tell 16		
	I S DIXIE HWY		ē:		Street A	Address (P.O. Box Number is Not Acceptable)	
MIA	AMI FL 33146			83	<b> </b>		
				03			
				84	City	FL 85 Zip Code	
44 5	10-11-07-07	:00 d 007 4500 F	tarida Ötat dan i	1		I I I I I I I I I I I I I I I I I I	
office or re	lo the provisions of Sections 607.05 e <b>giste</b> red agent, or both, in the Stal	le of Florida. Such d	iorioa Statutes, i hange was auth	ine abov orized b	e-named t y the corp	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered	
agent. La	or familiar with, and accept the obli	gations of Section 6	607.0505, Florida	a Statute	S.	21 Dam 3-1198	
SIGNATURE	-/www		M.	<del>ሊ</del> ኒ≙	7 201	required when reinstating) DATE	
12.	Signature, typed or printed name of registered a  OFFICERS A	ND DIRECTORS	(NOTE: NO	13.	on agradae	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD		DELETE	1.1 TITLE	1	Change Addition	
NAME	LUNDSTROM, DAVID	_		1.2 NAME		•	
STREET ADDRESS	451 S DIXIE HWY				ADDRESS		
CITY-ST-ZIP	MIAMI FL 33146		1.4 CIT		· · · i		
TITLE	VD		DELETE 2.1 T		71-211	Change Addition	
NAME	LUNDSTROM, LESLIE			2.2 NAME			
STREET ADDRESS	451 S DIXIE HWY			2.3 STREET	LAUDBECC		
	MIAMI FL 33146		:	2.4 City-			
CITY-ST-ZIP TITLE	STD			3.1 TITLE	31-20	☐ Change ☐ Addition	
NAME	7		3.2 NAME		was a series of the series of		
STREET ADDRESS	454 O DIVIE LIBERY		3.3 STREET	AUDBESS			
	MIAMI FL 33146			3.4. CITY-			
CITY-ST-ZIP TITLE	mann is will	r	DELETE	4.1 TITLE	U1-411	☐ Change ☐ Addition	
NAME		_		4. 2 NAME			
STREET ADDRESS				4.3 STREET			
CITY-ST-ZIP				4.4 CITY-5			
TITLE			DELET <b>E</b>	5.1 TITLE	4.71	Change Addition	
NAME		<del></del>		5.2 NAME			
STREET ADDRESS				5.3 STREET	ADDRESS		
CITY-ST-ZIP				5.4 CITY - 5			
TITLE			DELET <b>E</b>	6.1 TITLE	.,	Change Addition	
NAME		_		6.2 NAME			
STREET ADDRESS				6.3 STREET	- AUUBECC		
l				6.4 CITY - S			
14. I hereby c	ertify that the information supplied	with this filing does	not qualify for th			d in Section 119.07(3)(i), Florida Statutes. I further certify that the information	

4. I 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, ex on an attachment with an address.

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325-6689747