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 # P94000052296 (8)

FIRST COAST CURRENCY EXCHANGE, INC.

Country

Principal Place of Business 5428 CLEVELAND ROAD JACKSONVILLE FL 32209

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

28

d, or on an attachment with an address

5428 CLEVELAND ROAD JACKSONVILLE FL 32209

FILED May 06 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualified 07/11/1994

59-3254994

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

FEI Number

24	25	29	30			Personal Property Tax due June 30. 🔀 Yes 🔲 N	0	
9. Name and Address of Current Registered Agent				\perp		10. Name and Address of New Registered Agent		
KAJY, PAUL J					Name	e		
5428 CLEVELAND ROAD				82	82 Street Address (P.O. Box Number is Not Acceptable)			
JACKSONVILLE FL 32209				"-	Ou doi:	tradition (1.0. box raphical is the receptable)		
	·			B3				
				84	<u> </u>	log 17: Cod		
				04	City	FL 85 Zip Cod	9	
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								
SIGNATURE	Signature, typed or pointed name of registe	erect agent and title if applicable	(NOTE: Regis!	ored Age	nt signature	ure required when reinslating) DATE		
12.	Officer	RS AND DIRECTORS	1	3.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	l 12	
TITLE	0	L DE	LETË 1.º	TITLE	i	☐ Change ☐	Addition	
NAME			2 NAME			5		
STREET ADDRESS			1.3 STREET ADDRESS		· ·	925		
CITY-ST-ZIP				CITY-S	T-ZIP			
TITLE	<u> </u>		TITLE		☐ Change	Addition C		
NAME	KAJY, PATRICK N		2.2	NAME	į			
STREET ADDRESS	11247 SAN JOSE BLVI		2.3	STREET	address	s		
CITY-ST-ZIP	JACKSONVILLE FL 322			4 CITY - 5	T-ZIP			
TITLE	D	☐ DE	LETE 3.1	TITLE	[Change	Addition	
NAME	• • • • • • • • • • • • • • • • • • • •		NAME	ĺ		- 1		
STREET ADDRESS	11247 SAN JOSE BLVD		3.3	STREET	address	\$ 	Į.	
CITY-ST-ZIP	JACKSONVILLE FL 322			I. CITY-S	T-ZIP			
TITLE		□ DE	LETE 4.º	TITLE	[Change L	Addition	
NAME			. 4.	2 NAME				
STREET ADDRESS			4.3	I STAEET	address			
CITY-ST-ZIP				CITY-S	T- 21P			
TITLE		☐ DE	LETE 5.º	TITLE		☐ Change	Addition	
NAME			5.2	NAME			(
STREET ADDRESS			5.3	STREET	address	8		
CITY-ST-ZIP	<u></u>			CITY-S	ſ-ZIP			
TITLE	DELETE 6.1		6.1 TITLE		☐ Change L	Addition		
NAME			62	NAME	i		- 1	
STREET ADDRESS			63	STREET	address	5	1	
CITY-ST-ZIP	<u> </u>			CITY-S				
14. 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 orfustee emplowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in								

Country