FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

P94000063164 (5) **DOCUMENT #**

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DOWNTOWN	PAWN	INC	

Principal Place of Business 2201 14TH ST W **BRADENTON FL 34205**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

Mailing Address

2a. Mailing Address

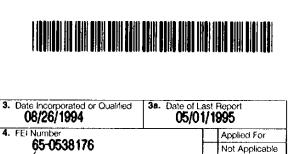
City & State

Suite, Apt. #, etc.

26

27

2201 14TH ST W **BRADENTON FL 34205**



5. Certificate of Status Desired

6. Election Campaign Financing

\$8.75 Additional

Fee Required

\$5.00 May Be

	28			Trust Fund Contribution Added to Fees
Country 25	Zip 29	C⊙ 30	untry	Florida Statutes Yes No
Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
SWARTZ, STANLEY R 1111 THIRD AVE W		81 82	Name Street Address (P.O. Box Number is Not Acceptable)	
14205			83 84	City 85 Zip Code
	25 and Address of Cu Y R N	Country Zip 25 29 and Address of Current Registered Agent Y R	Country Zip Country 25 29 30 and Address of Current Registered Agent Y R	Country Zip Country 25 29 30 and Address of Current Registered Agent Y R N 82

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

SIGNATURE: _	Signature, typod or printed name of registered agent and t	itle if amplicable (NO	TE. Registered Agent signature required when re				
12. OFFICERS AND DIRECTORS			13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	NS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	DELETE	1. 1 TITLE	Change	☐ Addition		
NAME	DOUGHARTY, EMMA		1.2 NAME				
STREET ADDRESS	2201 14TH ST W		1.3 STREET ADDRESS				
CHY-ST-ZIP	BRADENTON FL 34205		1.4 CITY-ST-ZIP				
TITLE		☐ DELFTE	2 1 TITLE	☐ Change	Addition		
NAME			22 NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
C/TY-ST-ZIP			24 CITY-ST-ZIP				
TITLE		☐ DELETE	3 1 TITLE	Change	Additio		
NAME			3 2 NAME				
STREET ADDRESS			3 3. STREET ADDRESS				
CITY-ST-ZIP			3.4 CITY-ST-ZIP				
TITLE		☐ DELETE	4. 1 TITLE	☐ Change	Additio		
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
HITLE		☐ DELETE	5. 1 TITLE	☐ Change	☐ Addit o		
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CHTY - ST - ZIP			5 4 CITY - ST - ZIP				
Tifle		DELETE:	6. 1 TITLE	☐ Change	Addition		
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-SI-ZIP			6 A CITY - ST. 7(P				

14. I do hereby cer ify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 certify that the information of the corporation or the receiver or truffiee 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 actives.

SIGNATURE:

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