

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000080041 (4)

1. Corporation Name

ALLEN BUY HERE PAY HERE, INC.

Principal Place of Business

690 FOX CREEK COURT
FT. LAUDERDALE FL 33327

Mailing Address

690 FOX CREEK COURT
FT. LAUDERDALE FL 33327

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

ALLEN, VANESSA S
1261 SEAGRAPE CIRCLE
FT. LAUDERDALE FL 33326

3. Date Incorporated or Qualified
10/31/1994

3a. Date of Last Report
10/20/1995

4. FEI Number

65-0531144

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
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

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 607.1509, 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 607.0503, Florida Statutes.

SIGNATURE

Signature typed and printed for each member, agent, and director

Signature typed and printed for each member, agent, and director

DATE

12. OFFICERS AND DIRECTORS

1. TITLE

D
ALLEN, VANESSA S
1261 SEAGRAPE CIRCLE
FT. LAUDERDALE FL 33326

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

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CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

12. NAME

13. STREET ADDRESS

14. CITY-ST-ZIP

15. TITLE

16. NAME

17. STREET ADDRESS

18. CITY-ST-ZIP

19. TITLE

20. NAME

21. STREET ADDRESS

22. CITY-ST-ZIP

23. TITLE

24. NAME

25. STREET ADDRESS

26. CITY-ST-ZIP

27. TITLE

28. NAME

29. STREET ADDRESS

30. CITY-ST-ZIP

31. TITLE

32. NAME

33. STREET ADDRESS

34. CITY-ST-ZIP

35. TITLE

36. NAME

37. STREET ADDRESS

38. CITY-ST-ZIP

39. TITLE

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 199.07(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 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 this report.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Signature of Agent

CR2E034 (12/95)