

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 129500004981

1. Corporation Name

MOBILE ONE CHECK CASHING INC.

Principal Place of Business

Mailing Address

5446 N.W. 57 Way
Coral Springs, Florida
33067

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Coral Springs, Florida
33067

2. Principal Place of Business

2a. Mailing Address

21 5446 N.W. 57 Way

26 5446 N.W. 57 Way

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

27 City & State

Coral Springs, Fl

Coral Springs, Fl

24 Zip Country

29 Zip Country

= 33067

25 Broward

30 33067

Broward

9. Name and Address of Current Registered Agent

STITSKY MURRAY

5446 N.W. 57 Way
Coral Springs, Florida 33067

3. Date Incorporated or Qualified 3a. Date of Last Report
January 17, 1995 N/A

4. FEI Number Applied For
65-0548966 Not Applicable

5. Certificate of Status Desired XX \$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 607.1508, 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 typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

President

STITSKY, MURRAY

5446 N.W. 57 Way
Coral Springs, Fl. 33067

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

7.1 TITLE 7.2 NAME 7.3 STREET ADDRESS 7.4 CITY-ST-ZIP

8.1 TITLE 8.2 NAME 8.3 STREET ADDRESS 8.4 CITY-ST-ZIP

9.1 TITLE 9.2 NAME 9.3 STREET ADDRESS 9.4 CITY-ST-ZIP

10.1 TITLE 10.2 NAME 10.3 STREET ADDRESS 10.4 CITY-ST-ZIP

11.1 TITLE 11.2 NAME 11.3 STREET ADDRESS 11.4 CITY-ST-ZIP

12.1 TITLE 12.2 NAME 12.3 STREET ADDRESS 12.4 CITY-ST-ZIP

13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-ST-ZIP

14.1 TITLE 14.2 NAME 14.3 STREET ADDRESS 14.4 CITY-ST-ZIP

15.1 TITLE 15.2 NAME 15.3 STREET ADDRESS 15.4 CITY-ST-ZIP

16.1 TITLE 16.2 NAME 16.3 STREET ADDRESS 16.4 CITY-ST-ZIP

17.1 TITLE 17.2 NAME 17.3 STREET ADDRESS 17.4 CITY-ST-ZIP

18.1 TITLE 18.2 NAME 18.3 STREET ADDRESS 18.4 CITY-ST-ZIP

19.1 TITLE 19.2 NAME 19.3 STREET ADDRESS 19.4 CITY-ST-ZIP

20.1 TITLE 20.2 NAME 20.3 STREET ADDRESS 20.4 CITY-ST-ZIP

21.1 TITLE 21.2 NAME 21.3 STREET ADDRESS 21.4 CITY-ST-ZIP

22.1 TITLE 22.2 NAME 22.3 STREET ADDRESS 22.4 CITY-ST-ZIP

23.1 TITLE 23.2 NAME 23.3 STREET ADDRESS 23.4 CITY-ST-ZIP

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31.1 TITLE 31.2 NAME 31.3 STREET ADDRESS 31.4 CITY-ST-ZIP

32.1 TITLE 32.2 NAME 32.3 STREET ADDRESS 32.4 CITY-ST-ZIP

33.1 TITLE 33.2 NAME 33.3 STREET ADDRESS 33.4 CITY-ST-ZIP

34.1 TITLE 34.2 NAME 34.3 STREET ADDRESS 34.4 CITY-ST-ZIP

35.1 TITLE 35.2 NAME 35.3 STREET ADDRESS 35.4 CITY-ST-ZIP

36.1 TITLE 36.2 NAME 36.3 STREET ADDRESS 36.4 CITY-ST-ZIP

37.1 TITLE 37.2 NAME 37.3 STREET ADDRESS 37.4 CITY-ST-ZIP

38.1 TITLE 38.2 NAME 38.3 STREET ADDRESS 38.4 CITY-ST-ZIP

39.1 TITLE 39.2 NAME 39.3 STREET ADDRESS 39.4 CITY-ST-ZIP

40.1 TITLE 40.2 NAME 40.3 STREET ADDRESS 40.4 CITY-ST-ZIP

41.1 TITLE 41.2 NAME 41.3 STREET ADDRESS 41.4 CITY-ST-ZIP

42.1 TITLE 42.2 NAME 42.3 STREET ADDRESS 42.4 CITY-ST-ZIP

43.1 TITLE 43.2 NAME 43.3 STREET ADDRESS 43.4 CITY-ST-ZIP

44.1 TITLE 44.2 NAME 44.3 STREET ADDRESS 44.4 CITY-ST-ZIP

45.1 TITLE 45.2 NAME 45.3 STREET ADDRESS 45.4 CITY-ST-ZIP

SIGNATURE:

Murray Stitsky

Feb. 2, 1996

(954) 340-8058

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)