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Feb 27 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000022034 (9)

1. Corporation Name
NARANJA TRADING POST AND PAWN, INC.



Principal Place of Business
26750 S. DIXIE HIGHWAY
NARANJA FL 33032

Mailing Address
26750 S. DIXIE HIGHWAY
NARANJA FL 33032-7431

3. Date Incorporated or Qualified: 03/16/1995
3a. Date of Last Report: 02/05/1996
4. FEI Number: 65-0568315
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

2. Principal Place of Business
21 Suite, Apt #, etc.
22 City & State
23 Zip
24 Country
25 Country

2a. Mailing Address
26 Suite, Apt #, etc.
27 City & State
28 Zip
29 Country
30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EBY, EDWIN M
15951 S.W. 254 STREET
PRINCETON FL 33032

81 Name: VALDO STRENTA
82 Street Address (P.O. Box Number is Not Acceptable): 24751 S.W. 144 AVE
83
84 City: PRINCETON FL 85 Zip Code: 33032

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 607.0503, Florida Statutes.

SIGNATURE: [Signature] DATE: 2/21/97
(NOTE: Registered Agent signature required when reinstating)

Table with 5 rows and 2 columns: OFFICERS AND DIRECTORS. Columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes Valdo Strenta and Jean Strenta.

Table with 5 rows and 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Columns: 1.1-1.4, 2.1-2.4, 3.1-3.4, 4.1-4.4, 5.1-5.4, 6.1-6.4. Includes checkboxes for Change and Addition.

14. I do 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, or on an attachment with an address.

SIGNATURE: [Signature] DATE: 1-29-97-302558-0440
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (9/96)