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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000029378

Country

9. Name and Address of Current Registered Agent

25

2358 WEST OAK RIDGE ROAD

ORLANDO FL 32809-3911

REGOLD PAWN & JEWELRY, INC.

Principal Place of Business

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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2358 WEST OAK RIDGE ROAD ORLANDO FL 32809-3911

2. Principal Place of Business

RING, TELMA E

Suite, Apt. #, etc.

City & State

23

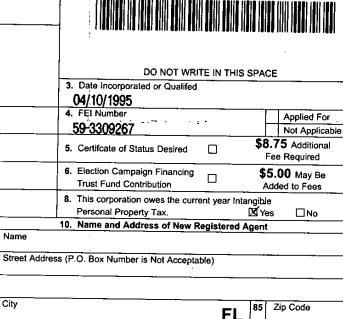
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Zip

2358 WEST OAK RIDGE ROAD ORLANDO FL 32809-3911

FILED Feb 18, 1999 8:00 am **Secretary of State**

02-18-1999 90133 007 ***150.00



84 City 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 reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITI F ☐ DELETE 1.1 TITLE ☐ Change ☐ Addition RING, TELMA E NAME 1.2 NAME 358 WEST OAK RIDGE ROAD STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32809-3911 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE □ DELETE 2.1 TITLE Change ☐ Addition NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS DITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE □ DELETE 3.1 TITLE ☐ Change Addition 3.2 NAME TREET ADDRESS 3.3 STREET ADDRESS TITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS TITY-ST-ZIP 4.4 CITY-ST-ZIP TILE □ DELETE 5.1 TITLE ☐ Change ☐ Addition IAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS ITY-ST-ZIP 5.4 CITY-ST-ZIP TLE ☐ DELETE 6.1 TITLE Change ☐ Addition AME 6.2 NAME TREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

Country

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A. 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 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, with all other like empowered.

SIGNATURE:

407-888-2880

CR2E034 (11/98)