FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000042109 (5)

CASH SOLUTION, INC.

Principal Place of Business Mailing Address
509 WEST 49TH STREET
HALEAH FL 33012
HALEAH FL 33012

FILED May 02 1997 8:00am Secretary of State



509 WEST 49TH STREET HALEAH FL 33012		509 WEST 48TH STREET HIALEAH FL 33012-3804						
					Date Incorporated or Qualified 05/24/1995	3a. Date of 07/01/19		***************************************
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	·	Applied f	For	
21		26		65-0652379		Not Appl		
Suite, Apt	#, elc.	Suite, Apt #, etc.			5. Certificate of Status Desired	□ \$8	3.75 Addition Fee Required	nai i
City & Stat	te	City & State			6. Election Campaign Financing Trust Fund Contribution		5.00 May B Added to Fees	
Z)p 24	Country 25	Zip 29	Count 30	гу		Yes XNo)	132,
	9. Name and Address of Curr	ent Registered Agent		41 41	10. Name and Address of New Re-	pistered Agen	<u>t</u>	
	BOLNICK, JOEL S ESQ.		8	1 Name				
SUIT	WEST FLAGLER STREET TE 2701		8		lress (P.O. Box Number is Not Acceptab	le)		
MIA	MI FL 33130		8	3				
			8	4 City		FL 85	Zip Code	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Stati	utes, the abo	ve-named cor	poration submits this statement for the p	uroose of char	I nging its regis	stered
office or i	registered agent, or both, in the Sta	ite of Florida. Such change was igations of, Section 607,0505, F	authorized Iorida Statut	by the corpora	acception's board of directors. I hereby accept	t the appointm	ient as registe	ered
SIGNATURE								
***************************************	Signature, typed or printed name of registered a			gent signature requ	ked when reinstaring)	DATE	507050	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC			12 Addition
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4. To hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(), 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 trusted appears in Block 12 or Block 15 if changed are not any name appears in Block 12 or Block 15 if changed are not any officer or director of the corporation of the receiver an angelment with an address.

SIGNATURE: 7

VPED OR PRINTED USINE OF MINING OFFICER OR DIRECTO

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