

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000076105
1. Corporation Name

CASH DISPENSING CORPORATION, INC.

Principal Place of Business

Mailing Address

1499 West Palmetto Park Rd., Ste 406
Boca Raton, FL 33486

3. Date Incorporated or Qualified

3a. Date of Last Report

10/95

4. FEI Number

65-0611958

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

2. Principal Place of Business

2a. Mailing Address

21. 2521 NE 11 Ct.

26.

Suite, Apt #, etc.

Suite, Apt #, etc.

22.

City & State

27.

City & State

23.

Ft. Lauderdale, FL

28.

Zip

Country

Zip

Country

24.

33304

25.

USA

29.

30.

9. Name and Address of Current Registered Agent

Cynthia H. Moe
2521 NE 11 Court
Ft. Lauderdale, FL 33304

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]

(If not a Registered Agent, signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
President/Director
Curtis Rossband
751 SW 3 Street
Boca Raton, FL 33486

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
Vice President
Cynthia Moe
2521 NE 11 Ct.
Ft. Lauderdale, FL 33304

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
Secty/Treasurer
Dieter Hausmann
2521 NE 11 CT
Ft. Lauderdale, FL 33304

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
Secty/Treasurer
Dieter Hausmann
2521 NE 11 CT
Ft. Lauderdale, FL 33304

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TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
Secty/Treasurer
Dieter Hausmann
2521 NE 11 CT
Ft. Lauderdale, FL 33304

11. TITLE
12. NAME
13. STREET ADDRESS
14. CITY- ST- ZIP
Director
Roger Taylor
2521 NE 11 Court
Ft. Lauderdale, FL 33304

21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY- ST- ZIP
Secretary
Cynthia Moe
2521 NE 11 CT
Ft. Lauderdale, FL 33304

31. TITLE
32. NAME
33. STREET ADDRESS
34. CITY- ST- ZIP
Treasurer
Curtis Rossband
751 SW 3 Street
Boca Raton, FL 33486

41. TITLE
42. NAME
43. STREET ADDRESS
44. CITY- ST- ZIP
500001883515
-07/03/96--01061--030
***225.00

51. TITLE
52. NAME
53. STREET ADDRESS
54. CITY- ST- ZIP
100001883511
-07/03/96--01061--029
***8.75

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 119.07(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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/3/96

954-561-0782

CR2E034 (3/96)