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

Mailing Address

% BARTNICK. P.A.

2300 GLADES ROAD, SUITE 415 EAST

BOCA RATON FL 33431-7386

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

Principal Place of Business

2300 GLADES ROAD, SUITE 415 EAST

% BARTNICK, P.A.

BOCA RATON FL 33431

DOCUMENT # P9600007502 (3)

SPEEDY TITLE LOANS, INC.

BOCA RATON FL 33431

2. Principa! Place of Business 2a. Mailing Address 4. FEI Number Applied For <u>65-0634540</u> 26 Not Applicable 21 Suite, Apt. #, etc Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees 23 Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Country Zip 30 Florida Statutes Yes 🔲 No 24 25 29 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name THOMAS, DONALD J 4730 NW BOCA RATON BLVD. Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33431** 83 84 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 (tile if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 11 TITLE Change Addition TITLE BOYMAN, SAUL 1.2 NAME NAME 2300 GLADES ROAD 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33431** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE BOYMAN, EVELYN 2.2 NAME NAME 2300 GLADES ROAD, SUITE 415 EAST 2.3 STREET ADDRESS STREET ADDRESS

2 4 CITY-ST-ZIP

3 3 STREET ADDRESS

3.4. CITY - \$1 - ZIP

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

31 TITLE

32 NAME

4.1 TITLE

A 2 NAME 4.3 STREET ADDRESS

51 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

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DELETE

6.4 CITY - ST - ZIP CITY - ST - ZIP 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:

CITY - ST - ZIP

STREET ADDRESS

STREET ADDRESS

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Sand Buy SAUL BOYMAN PRES-1-29-97 305-653-9367
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Change

Change

Change

Change

Addition

Addition

Addition

Addition

FILED

Feb 07 1997 8:00am

Secretary of State

3a. Date of Last Report

3. Date Incorporated or Qualified

01/22/1996

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