

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000034467

FILED
Sep 14, 2004
Secretary of State

Entity Name: FIRST MOBILE CHECK CASHING, INC.

Current Principal Place of Business:

626 RENAISSANCE POINTE
STE 203
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

611 SHERWOOD DRIVE
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

626 RENAISSANCE POINTE
STE 203
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

611 SHERWOOD DRIVE
ALTAMONTE SPRINGS, FL 32701

FEI Number: 59-3380919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEMUS, LESLIE
626 RENAISSANCE POINTE
STE 203
ALTAMONTE SPRINGS, FL 32714

Name and Address of New Registered Agent:

LEMUS, LESLIE
611 SHERWOOD DRIVE
ALTAMONTE SPRINGS, FL 32701

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LESLIE LEMUS

09/14/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEMUS, LESLIE
Address: 626 RENAISSANCE POINTE STE 203
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEMUS, LESLIE
Address: 611 SHERWOOD DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LESLIE LEMUS

P

09/14/2004

Electronic Signature of Signing Officer or Director

Date