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 # P96000037429 (3)

CASH FOR TITLES, INC.

Principal	Place	Οl	Business
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SIGNATURE:

Mailing Address

FILED Apr 18 1997 8:00am Secretary of State



2. Principal Place of Business 21 3025 W DAVIE BIVD 26 3025 W OAVIE BIVD 65 Suite, Apr. #, etc 22 City & State 23 FL LAVO, FL 28 FL LAVO, FL 3 City & State 24 33312 Sup Country 25 USA 29 33312 30 USA 9. Name and Address of Current Registered Agent 10. SHARKEY, BOB 3116 N FEDERAL HWY SUITE 261 HOUTHOUSE POINT EL 2004	O4/26/1996 FEI Number 5 068 15 8 Certificate of Status Desired Election Campaign Financing Trust Fund Contribution This corporation has liability for inter Florida Statutes Name and Address of New Regist FARKEY P.O. Box Number is Not Acceptable W. DAUGERARIE On submits this statement for the purp	Fee Required \$5.00 May Be Added to Fees Ingible tax under s. 199.032, as No lered Agent No No
2. Principal Place of Business 2. Principal Place of Business 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. City & State 3. City & State 4. City & State 5. City & State 2. City & State 2. City & State 3. City & State 4. City & State 5. Country 7 ip Country 2. Tip 3. Name and Address of Current Registered Agent 3. Name 3. Street Address of Country 4. City 5. Country 7 ip Country 8. Name and Address of Current Registered Agent 10. SHARKEY, BOB 3116 N FEDERAL HWY SUITE 261 LIGHTHOUSE POINT FL 33064 81 Name 62 Street Address (P 3. 0. 2.5 83 FORAL 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's bagent. I am familiar with, and accept the obligations of. Section 607.0508, Florida Statutes.	O4/26/1996 FEI Number 5 068 15 8 Certificate of Status Desired Election Campaign Financing Trust Fund Contribution This corporation has liability for inter Florida Statutes Name and Address of New Regist FARKEY P.O. Box Number is Not Acceptable W. DAUGERARIE On submits this statement for the purp	Applied For Not Applicable St.75 Additional Fee Required \$5.00 May Be Added to Fees Ingible tax under s. 199.032, as Notered Agent FL 85 Zip Code 3 \$312 cose of changing its registers
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Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Country Zip Country B, Name and Address of Current Registered Agent SHARKEY, BOB 3116 N FEDERAL HWY SUITE 261 LIGHTHOUSE POINT FL 33064 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's bagent. Lam familiar with, and accept the obligations of. Section 607.0505, Florida Statutes.	Certificate of Status Desired Election Campaign Financing Trust Fund Contribution This corporation has liability for inter Florida Statutes Name and Address of New Regist CARKEY P.O. Box Number is Not Acceptable) D.D. Box Number is Not Acceptable D.D. Box Number is Not Acceptable	\$8.75 Additional Fee Required \$5.00 May Be Added to Fees Ingible tax under s. 199.032 In Indian Indi
City & State Country Zip Country B. Country Sip Country Sip Country B. Country B. Country B. Country B. Country B. SHARKEY, BOB 3116 N FEDERAL HWY SUITE 281 LIGHTHOUSE POINT FL 33064 B3 Forct B4 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's bagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	Election Campaign Financing Trust Fund Contribution This corporation has liability for inter Florida Statutes Name and Address of New Regist FLARKEY P.O. Box Number is Not Acceptable) DAVE B DAVERDARE On submits this statement for the purp	Fee Required \$5.00 May Be Added to Fees Ingible tax under s. 199.032 Is No Isred Agent FL 85 Zip Code 3 \$3 7 2 Isse of changing its registere
3 FL LAVO, FL 28 FL LAVO, FL 30 Country 7/19 Country 8. 4 333 12 25 U SA 29 333 12 30 U SA 8. 9. Name and Address of Current Registered Agent 10. SHARKEY, BOB 3116 N FEDERAL HWY 82 Street Address (P 30 25 LIGHTHOUSE POINT FL 33064 83 FORT L 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's bagent. I am familiar with, and accept the obligations of. Section 607.0505, Florida Statutes.	Trust Fund Contribution This corporation has liability for interflorida Statutes Name and Address of New Regist TARKEY P.O. Box Number is Not Acceptable) DAVE B On submits this statement for the purp	Added to Fees Ingible tax under s. 199.032, Iss No Isred Agent A Company Comp
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office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's bagent. I am familiar with, and accept the obligations of, Section 607,050\$, Florida Statutes.	on submits this statement for the purp board of directors. I hereby accept the	ose of changing its registere
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's bagent. I am familiar with, and accept the obligations of, Section 607,050\$, Florida Statutes.	board of directors. I hereby accept th	COO C.
		e appointment as registered
CIGNATURE 13013 SHACKEY		2-17-97
She also typed or harters had e of registered agont and title it approaches. (NOTE: registered agent agont signature required when		ATE 7
	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
THE PRESENTED LITTLE		Change Addition
NAME STREET ADDRESS 3025 W. DAVIE Blud. CITY-ST ZIP FORT LANDERS PIA 83312 14 CITY-ST-ZIP		
CITY-ST ZIP FORT LOUGERABIE PIA 33512 14CITY-ST-ZIP		
DELETE 2.1 TILE	**************************************	Change Addition
NAME 2.2 NAME		
STREET ADDRESS 2.3 STREET ADDRESS		
CHY-ST-ZIP 2.4 CITY-ST-ZIP		
THE DELETE 31 THE	Carrage	Change Addition
NAME 32 NAME	·	
STREET ADDRESS		
CHY-SI-7IP 3.4 CHY-ST-7IP		
TITLE DELETE 4.1 TITLE		Change Additi
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TITLE DELETE 5.1 TITLE		Change Additi
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C11Y-S1-76* 5.4 C1TY-S1-7IP		
TITLE DELETE 6.1 TITLE		Change Additi
NAME 62 NAME		
STREEL ADDRESS 6.3 STREET ADDRESS		
CITY SE 749 6.4 CITY-ST-ZIP		
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Se	ection 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 signament an officer or director of the corporation or the receiver or trustee empowered to execute this report as re	iignature shall have the same legal eff required by Chapter 607, Florida Stati	iect as if made under oath; ti ites: and that my name