

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000063218

FILED
Jul 05, 2005
Secretary of State

Entity Name: THE CHECK CASHING AND MONEY CENTER INC.

Current Principal Place of Business:

5275 BABCOCK ST. N.E.
#11
PALM BAY, FL 32905 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 61712
PALM BAY, FL 32906 US

New Mailing Address:

FEI Number: 59-3395158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, MARKEE J
1244 SARNO RD.
MELBOURNE, FL 32934 US

Name and Address of New Registered Agent:

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:

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: WHITE, MARKEE J
Address: 1244 SARNO RD
City-St-Zip: MELBOURNE, FL 32934

Title: V () Delete
Name: WHITE, TANYA S
Address: 1244 SARNO RD
City-St-Zip: MELBOURNE, FL 32934

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARKEE J WHITE

PRES

07/05/2005

Electronic Signature of Signing Officer or Director

Date