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Aug 04 1997 8:00am  
Secretary of State

PROFIT CORPORATION  
ANNUAL REPORT  
1997

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

DOCUMENT # P96000063912

1. Corporation Name

GUARANTEED TITLE LOANS, INC

Principal Place of Business Mailing Address  
12483 67TH ST NORTH 12483 67TH ST N  
WEST PALM BEACH, FL 33412 WEST PALM BEACH, FL  
33412

2. Principal Place of Business	2a. Mailing Address
21 1021 S FEDERAL HWY	26 1021 S FEDERAL HWY
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23 POMPANO BEACH, FL	28 POMPANO BEACH, FL
Zip	Zip
24 33062	29 33062
County	County
25 BROWARD	30 BROWARD

Amendment

3. Date Incorporated or Qualified	3a. Date of Last Report
7-29-96	5-1-97
4. FEI Number	Applied For
65-0685191	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	\$5.00 May Be Added to Fees
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

MARK E. MONTORZI  
12483 67TH ST N  
WEST PALM BEACH, FL 33412

10. Name and Address of New Registered Agent

81 Name	NAUM GLAZER
82 Street Address (P.O. Box Number is Not Acceptable)	1021 S. FEDERAL HWY
83	
84 City	Pompano Beach FL
85 Zip Code	33062

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 NAUM GLAZER PRESIDENT DATE 7-28-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRES/OOWNER	1.1 TITLE	PRESIDENT
NAME	MARK E. MONTORZI	1.2 NAME	NAUM GLAZER
STREET ADDRESS	12483 67TH ST N	1.3 STREET ADDRESS	4590 CREAMBOLA CIRE SOUTH
CITY-ST-ZIP	WEST PALM BEACH, FL 33412	1.4 CITY-ST-ZIP	COCONUT CREEK, FL 33066
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 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 for an attachment with an address.

SIGNATURE: NAUM GLAZER DATE 7-28-97 954-975-9020