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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000067814 (9)

EASY CASH TITLE LOANS, INC.

Principal Place of Business Mailing Address 12945 SW 8TH AVENUE 12945 SW 8TH AVENUE OCALA FL 34473 OCALA FL 34473 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/13/1996 2a. Mailing Address FEI Number 2. Principal Place of Business Applied For Not Applicable 21 59-3397712 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 23 Zìo Country Country Zip This corporation owes or has paid the current year Intangible X Yes □ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RICHARDS, BRADLEY T 12945 SW 8TH AVENUE Street Address (P.O. Box Number is Not Acceptable) OCALA FL 34473 83 84 City 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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change ___ Addition TITLE 1.1 TITLE RICHARDS, BRADLEY T CR2E034 NAME 1.2 NAME 12945 SW 8TH AVENUE STREET ADDRESS 1.3 STREET ADDRESS OCALA FL 34473 CITY - ST - ZIP 1.4 CITY-ST-ZIP TITLE DELETE Change Addition NAME GARRIGUES, RICHARD 2.2 NAME 12945 SW 8TH AVENUE 2.3 STREET ADDRESS STREET ADDRESS **OCALA FL 34473** 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE 3.1 TITLE Addition TITLE RICHARDS, DEBRA A NAME 3.2 NAME 12945 SW 8TH AVENUE 3.3 STREET ADDRESS STREET ADDRESS **OCALA FL 34473** 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change __ Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition Change 6.1 TITLE TITLE 6.2 NAME NAME

14. I 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.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

BAZIONATA GRAZINA ED

1/13198

(352) 307-1015

FILED

Jan 23 1998 8:00am

Secretary of State