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 # P96000072781 (3)

DON'S TITLE LOANS, INC.

Principa' Place of Business Mailing Address

706 SOUTH US HIGHWAY 41 706 SOUTH US HIGHWAY 41
INVERNESS FL 34450 INVERNESS FL 34450

FILED Feb 06 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

2 Date Incorporated or Qualified

2. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c. Cattle Countre 2c. C						09/03/1996			
Suite, Apt #, etc. Suite, Ap	2. Principal P	lace of Business	2a. Mailing Address						
Suita, Apt. 4, etc.	21		26]		50-2405350			
City & State City & Country City Country City Country City Country City Country City Country City									
22 25 25 25 25 25 26 25 26 27 28 28 28 29 29 20 28 28 29 29 20 28 29 29 20 20 28 29 20 20 28 29 20 20 28 20 20 20 20 20	22		27			5. Certificate of Status Desired			
28	City & Stat	e	City & State			6. Election Campaign Financing	\$5.00	May Pa	
Zip Country Zip Country Zip Country S. This corporation owes on has paid the current year Intangible Personal Proposery Tax due June 30. Yes No. No. Yes No. Yes No. Yes No. Yes No. No. No. Yes No. No.	23		28			, , , , , , , , , , , , , , , , , , , ,			
28		Country	Zip	Cour	ntry				
S. Name and Address of Current Registered Agent ZINN, DONALD A 706 SOUTH US HIGHWAY 41 INVERNESS FL 34450 82 Street Address (P.O. Box Number is Not Acceptable) 83 87 84 City FL ST 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 exploitment as registered agent, and maintain with, and accepts the exclipation of, Section 607.0505, Plorida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ITILE 12. ITILE 21. ITILE 31. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITILE 41. N. ROBINSON ROAD 13. STREET ADDRESS CITY-ST-2P 14. N. ROBINSON ROAD 13. STREET ADDRESS CITY-ST-2P 14. N. ROBINSON ROAD 13. STREET ADDRESS CITY-ST-2P 14. N. ROBINSON ROAD 15. STREET ADDRESS CITY-ST-2P 16. ITILE 17. I	24	25	29	30					
SOUTH US HIGHWAY 41 INVERNESS FL 34450 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 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 Ronda, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Ronda, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Ronda Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. N. ROBINSON ROAD 15. TITLE 15. TITLE 2INN, DONALD A 12. NAME 2INN, DONALD A 14. N. ROBINSON ROAD 14. N. ROBINSON ROAD 14. N. ROBINSON ROAD 14. N. ROBINSON ROAD 15. STREET ADDRESS CITY-51-2IP 10. DELETE 22. STREET ADDRESS CITY-51-2IP 10. Change Addition SIRRET ADDRESS CITY-51-2IP 10. Change Addition ACCIV-51-2IP 10. Change									
Street Address (P.O. Box Numbor is Not Acceptable) Street Address (P.O. Box Numbo	ZIN	N. DONALD A		81 Name					
INVERNESS FL 34450 84	· · · · · · · · · · · · · · · · · · ·				20 Charles Address (D.O. Franklands Alexander)				
SIGNATURE				ľ	82 Street Address (P.O. Box Number is Not Acceptable)				
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 Riorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. Signature					83		-		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida 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 Rorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Rorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Rorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Rorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Rorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Rorida. Such change as authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both and agent and the supplication of Rorida Statutes. In the supplication of Rorida Statute				L					
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 agent. I are registered agent and itse if applicable. (NOTE: Registered by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent and registered agent and rise if applicable. (NOTE: Registered Agent signature required when revisating)					84 City	85 Zip Code			
SIGNATURE Signatures, typeed or printed rearme of registered agont and lite if apopticable (NOTE: Registered Agont signature required when reincasting) DATE	11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above pared cornecation submits this statement for the purpose of th								
SIGNATURE Signatures, typeed or printed rearme of registered agont and lite if apopticable (NOTE: Registered Agont signature required when reincasting) DATE	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								
Signature, typed or printed mayor for climate in applicable NOTE: Registered Appent signature required when intensitying) DATE	agent, I am ramiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
12.									
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		ertify that the information supplied with	h this filing does not qualify fo	or the exec	notion stated	in Section 119.07(3)(i). Florida Statutes I further cert	ify that the i	information	

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 appeddress.

SIGNATURE:

MRKinkfatuckich W.R.KIRKPATRICK 2-1-98,2-237884