

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

APPROVED
AND
FILED

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE
		Sandra B. Mortham
		Secretary of State DIVISION OF CORPORATIONS

98 AUG -7 AM 8:27

DOCUMENT # P97000043232
1. Corporation Name
INSTANT CAR CASH OF MILL HOPPER, INC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21	1203 SW 16 AVE	26	971 E. TENNESSEE ST	59-3447368		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		X \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
City & State		City & State		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		Yes No	
23	GAINESVILLE FL	28	TALLAHASSEE, FL	29		30	
24	32601	25	ALACHUA	29		30	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81	Name	MICHAEL J. CONIGLIO	
82	Street Address (P.O. Box Number is Not Acceptable)	971 E. TENNESSEE ST	
83			
84	City	TALLAHASSEE	FL
85	Zip Code	32308	

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:  MICHAEL J. CONIGLIO 8-7-98
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	PRESIDENT-DIRECTOR
NAME		1.2 NAME	STUART B. PALMER
STREET ADDRESS		1.3 STREET ADDRESS	8020 S.W. 56 AVE
CITY-ST-ZIP		1.4 CITY-ST-ZIP	GAINESVILLE FL 32608
TITLE		2.1 TITLE	ASST. SEC
NAME		2.2 NAME	MICHAEL J. CONIGLIO
STREET ADDRESS		2.3 STREET ADDRESS	971 E. TENNESSEE ST
CITY-ST-ZIP		2.4 CITY-ST-ZIP	TALLAHASSEE FL 32308-6939
TITLE		3.1 TITLE	
NAME		3.2 NAME	200002612552--4
STREET ADDRESS		3.3 STREET ADDRESS	-08/11/98--01031--011
CITY-ST-ZIP		3.4 CITY-ST-ZIP	***558.75 ***558.75
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 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.

SIGNATURE:  8-7-98

CR2E034 (10/97)