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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 20 1998 8:00am

Secretary of State

4/15/98 (305) 642-9020

Sandra B. Mörtkam '

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000061682 (5)

"QUICK 'N' E-Z AUTO LOANS, INC.

Principal Place of Business Mailing Address 308 N.W. 27TH AVENUE 308 N.W. 27TH AVENUE MIAMI FL 33125 MIAMI FL 33125 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/16/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 8. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zπ 8. This corporation owes or has paid the current year Intangible Yes Yes □ No Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BORGES, GILBERTO R SR. 308 N.W. 27TH AVENUE Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33125** 83 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fforida 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 Fforida. 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, Fforida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title it application (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE PSD Change TITLE 1.1 THLE Addition BORGES, GILBERTO R NAME 1.2 NAME 308 N.W. 27TH AVENUE STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33125 CITY-ST-ZIP 1.4 CITY-ST-ZIP Change DELETE ■ Addition TITLE 21 1IILE 2.2 NAME NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Addition Change TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIF DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREE1 ADDRESS CITY-ST-ZIP 4.4 CITY - ST - 7IP DELETE ___ Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST - ZIP TITLE DELETE 61 TITLE Addition NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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.