

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



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

DOCUMENT # **P97000102085 (2)**

1. Corporation Name

**CASHMASTERS INTERNATIONAL (S.E.), INC.**

**FILED**  
**Sep 17 1998 8:00am**  
**Secretary of State**



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
**1255 S. SUNBELT CIR**  
**5401 SOUTH KIRKMAN ROAD**  
**SUITE 500**  
**ORLANDO FL 32809**

Mailing Address  
**CH R. A. ALLEN & CO**  
**5401 SOUTH KIRKMAN ROAD**  
**SUITE 300**  
**ORLANDO FL 32819**

2. Principal Place of Business  
21 **1255 La Quinta Dr**  
Suite, Apt. #, etc.  
22 **118**  
City & State  
23 **Orlando FL**  
Zip Country  
24 **32809** 25 **USA**

2a. Mailing Address  
26 **1255 La Quinta Dr.**  
Suite, Apt. #, etc.  
27 **118**  
City & State  
28 **Orlando FL**  
Zip Country  
29 **32809** 30 **USA**

3. Date Incorporated or Qualified

**12/01/1997**

4. FEI Number

**59-3481107**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

**CORY, JENNIFER L**  
**5401 SOUTH KIRKMAN ROAD**  
**SUITE 500**  
**ORLANDO FL 32819**

10. Name and Address of New Registered Agent

81 Name

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 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

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
	<b>D HUNTER, NEIL</b>	<b>9 HAVENS EDGE</b>	<b>LIMEKILNS FIFE SCOTLAND</b>	<input type="checkbox"/>
	<b>D HUNTER, MARGARET ROSE P</b>	<b>9 HAVENS EDGE</b>	<b>LIMEKILNS FIFE SCOTLAND</b>	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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

**Neil Hunter**

**9-15-98**

**(1102) 855-1118**

CR2E034 (5/98)