

**1999-2000 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # S 16887

1. Entity Name

Quick Cash Check Cashing Inc.

Principal Place of Business

Mailing Address

3115 W. Columbus DR.

TAMPA FL 33607 STE 106

SAME.

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3089463

Applied For

Not Applied

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Leslie McCalla  
8602 Brookway Cir  
TAMPA FL 33635

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

*Leslie McCalla*  
Signature of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)

1/25/02  
DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
*EXISTED*  
*LESLIE MCCALLA*  
*8602 BROOKWAY CIR*  
*TAMPA FL 33635*

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
800003155758-82  
-03/03/00--01011--004  
\*\*\*\*158.75 \*\*\*\*158.75

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
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☐ Change ☐ Addition

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CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
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CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TS  
03/11/99 029 150.00

☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowers.

SIGNATURE

*Leslie McCalla*  
Signature and typed or printed name of signing officer or director

1/25/02  
Date

(813) 875-2274  
Daytime Phone #

516887

# QUICK CASH CHECK CASHING, INC.

## MAIN OFFICE

2700 N. MacDill Ave, Ste. 207  
Tampa, Florida 33607  
(813) 875-2274

4815 E. Busch Blvd, Ste. 114  
Tampa, Florida 33617  
(813) 988-6161 Fax (813) 988-6332

28 January 2000 2


To whom it may concern;

I, Leslie McCalla, have mailed out the first report

I recieved back to the Department of Corporations with a check which was cashed. Now I'm Understanding there's a problem, and after speaking to one of your representatives I'm mailing another check for the amount of \$150.00 and \$8.75 so I can have this corporation reinstated.

If there's any questions please call me, Leslie McCalla  
at Quick Cash Check Cashing, Inc. (813) 875-2274.

Sincerely Yours,

  
Leslie McCalla