## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



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

1996

Corporation I	MENT # <b>S40373</b> Name T'S PAWN SHOP, INC.								
rincipal Place o 5122 S. STATE HOLLYWOOD I	E ROAD #7	Mailing Address 5122 S. STATE ROAD #7 HOLLYWOOD FL 33314			- I TODATRIJO IJI DIDIJ BOJBO ALITI 1999 -	<b>.</b> 1111 <b>. 110</b> 11 <b>.</b> 1101 <b>.</b> 1	JII <b>Jibi</b> i <b>J</b> illi	<b>               </b>	
						3. Date Incorporated or Qualified 03/28/1991	3a. Date of 04/2	Last Repo 1/1995	хt
Principal Plac	ce of Business	2a. Mailing Address				4. FEI Number 65-0252370		<b>—</b>	olied For
Suite, Apl. #, etc.		<b>26</b>			***************************************		Not Applicable  \$8.75 Additional		
City & State		27   City & Stato   28				5. Certificate of Status Desired Fee Required			
						6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees			
Zφ	Country	Zip	Cou	ntry		8. This corporation has liability for	intangible tax u		····
	25	29 Registered Agent	30			Florida Statutes Yes  10. Name and Address of New F	No		
	9. Name and Address of Current	negistered Agent		81	Name	IU. Name and Address of New P	redisteran wat	7111	
NARBONI	E, VINCENT J.			82	Street Addre	ss (P.O. Box Number is Not Acceptat	ole)		
	STATE ROAD #7								
HOLLYWO	OOD FL 33314			83					
				84	City		FL.	35 Zip C	ode
	OFFICERS AND		13.		signature required	ADDITIONS/CHANGES TO OFF			IN 12 Addition
MÉ	NARBONE, VINCENT J.		12 N/			•	L.) .	yundo [	
ELL ADDRESS	5122 S. STATE ROAD #7 HOLLYWOOD FL				ADDRESS				
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EL ADDRESS			3.3 S	TREET	ADDRESS				
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EET ADDRESS 7-81-7P			53 SI 54 CI		ADDRESS I-ZiP				
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ri .			6 2 NA						
FELADORESS					ADDRESS				
Y-S`-ZP  . I do hereby	certify that the information supplied w	ith this finng is voluntarily fun	64 Ch nished and		<del>-</del>	r the exemption stated in Section 119	.07(3)(k), Florida	Statutes.	I further
oertify that I oath; that I	the information indicated on this arinua am an officer or director of the corpor	al report or supplemental and ation or the receiver or truste	nual report is se empower	s true	e and accurate	and that my signature shall have the	same legal effe	ect as if ma	ade under
	Block 12 or Biock 13 if <b>g</b> hanged, or or	i an attachment with an <b>a</b> cid	ress A						
appears in l		1 1 11				1-30-96		,	_