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

S61160

LAKES CHECKCASHERS, INC. Principal Place of Business 401 N.E. 167TH STREET NORTH MIAMI BEACH FL 33162 US 3. Date Incorporated or Qualified 06/20/1991 4. FEI Number 21 22 Suite, Apt. #, etc. 23 City & State 26 City & State 27 Country Zip Country Address 4. This corporation Name 4. Fel Number 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199.032,	DOCU	MENT # S6116	60 (5)					
AND NE LETTH STREET NORTH MANU BEACH FL 33162 12	1. Corporation	i Name	(0)					
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Processor Proc	Suite Apt. #	, etc.	Suite, Apt. #, etc.				\$8.	
28	22			· · · · · · · · · · · · · · · · · ·			Fe	e Required
9. Name and Address of Current Registered Agent OKO, RALPH N 401 N.E. 167TH STREET NORTH MIAMI BEACH FL 33182 11. Pusuant to the provisions of Sections 607,0502 and 607,1508. Forma Statutes, the above named conjunctor submits this statement for the purpose of changing has registered agent. I am for registered agent, or both, in the State of Florida. Such change was authorized by the corporation's bound of disectors. I hereby accept the appointment as registered agent. I am formation with, and accept the obligations of Sections 607,0502 and 607,1508. Forma Statutes, the above named conjunction submits this statement for the purpose of changing has registered agent. I am formation with, and accept the obligations of Sections 607,0502 and 607,0503 an	City & State		- ├ ── '					
9. Name and Address of Current Registered Agent OKO, RALPH N 401 N.E. 1677H STREET NORTH MIAMI BEACH FL 33162 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 difficult with, and accept the chilgablose of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered difficult with, and accept the chilgablose of Sections 607.0502 in Facilities. SIGNATURE 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 difficult with, and accept the chilgablose of Sections 607.0502. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered difficult with an accept the chilgablose of Sections 607.0502. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered difficult with a corporation with, and accept the chilgablose of Sections 607.0502. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered difficult with a corporation with a corporatio	Ζ(ρ 24	├ ──┐ ′	<u>├</u> ─	· · · · · ·				
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401 N.E. 187TH STREET NORTH MIAMIL BEACH FL 33162 BS B4				81	Name			<u> </u>
NORTH MIAMI BEACH FL 33162 B4	OKO, R	alph n		82	Street Addr	ress (P.O. Box Number is Not Acceptable	le)	
1. Fursion to the provisions of Sections 607.0502 and 607.1508. Foods 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 registered agent 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 state of profess and profess and profess. I am state of profess and profess. I am state and profess							·	
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	14. I do hereby	certify that the information supplied	with this filing is voluntarily furnis			or the exemption stated in Section 119.0	07(3)(k), Florida Sta	itutes. I further

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 manged, or on an attachment with an address.

PALEM NOKO SIGNATURE:

PRES 4-14-96 954-454-4700

Date Dayting Phone :