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CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 AM 11:29

DOCUMENT # S93210 (0)

SOUTH FLORIDA GUN & PAWN, INC.

Principal Place of Business: 844 S. FLORIDA AVENUE, LAKELAND FL 33801, US

Mailing Address: 3604 WATERFIELD PKY, LAKELAND FL 33803-9736, US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/08/1991

3a. Date of Last Report: 05/01/1994

4. FEI Number: 59-3085340 | 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 has liability for intangible tax under S. 199.032 Florida Statutes. [✓] Yes [ ] No

2. Principal Office (if changed) 21–25; 2a. Mailing Address 26–30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
TURBEVILLE, HUGH J 3604 WATERFIELD PARKWAY LAKELAND FL 33803	81 Name: NORM HARRITT 82 Street Address (P.O. Box Number is Not Acceptable): 844 E FLORIDA AV 83 84 City: LAKELAND FL 85 33801

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: Norman L Harritt

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	TURBEVILLE, HUGH J
STREET ADDRESS	1204 ROLLINGWOODS LN
CITY-ST-ZIP	LAKELAND FL
TITLE	D
NAME	KASSAW, GAYNELL
STREET ADDRESS	3604 WATERFIELD PKWY
CITY-ST-ZIP	LAKELAND FL
TITLE	D
NAME	HARRITT, NORMAN L
STREET ADDRESS	327 HOWARD AVE
CITY-ST-ZIP	LAKELAND FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (none entered)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Norman L Harritt NORMAN L HARRITT 4/1/95 813 655 0418

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0314905 CP