FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 17 AM 11:48

DOCUMENT # V05655 (8)

1. Corporation Name
27TH AVENUE PAWN SHOP, INC.

Principal Place of Business
2043 NW 27TH AVE
MIAMI FL

Mailing Address
2043 NW 27TH AVE
MIAMI FL

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/10/1992
3a. Date of Last Report: 02/04/1994
4. FEI Number: 65-0308684 [ ] Applied For [ ] Not Applicable

2. Principal Place of Business | 2a. Mailing Address
Suite, Apt. #, etc. | Suite, Apt. #, etc.
City & State | City & State
Zip | Country | Zip | Country

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 [X] Yes [ ] No

9. Name and Address of Current Registered Agent

CEASE, MICHAEL S
2720 W FLAGLER STREET
MIAMI FL 33135

10. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	[X] Change [ ] Addition
NAME	SMITH AL	NO LONGER WITH CORPORATION
STREET ADDRESS	2043 NW 27TH AVE	
CITY-ST-ZIP	MIAMI FL	
TITLE	P	[ ] Change [ ] Addition
NAME	ROMAN, HERNZ	
STREET ADDRESS	2043 NW 27TH AVE	
CITY-ST-ZIP	MIAMI FL	

14. I do 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: ROMAN HERNZ 1/9/95 305-638-3632

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0162073 CP