

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V13098** (1)

1. Corporation Name

THE CHECK CASHING STORE #30, INC.



Principal Place of Business

**48 W ATLANTIC AVE
DELRAY BEACH FL 33444
US**

Mailing Address

**5200 N.W. 33RD AVENUE
203
FT. LAUDERDALE FL 33309
US**

3. Date Incorporated or Qualified

02/10/1992

3a. Date of Last Report

04/19/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

36-3812448

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HAUSER, PAUL
5200 N.W. 33RD AVENUE
SUITE #203
FT. LAUDERDALE FL 33309**

81 Name

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

83

84 City

FL

85 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

Signature typed or printed name of registered agent and their appointment

NOTE: Registered Agent signature required when reappointing

DATE

12. OFFICERS AND DIRECTORS

TITLE **DP** ☐ DELETE
NAME **HERSHMAN, BARRY E.**
STREET ADDRESS **1400 E. TOUHY AVE., #100**
CITY-STATE-ZIP **DES PLAINES IL**

TITLE **DV** ☐ DELETE
NAME **HAUSER, PAUL**
STREET ADDRESS **5200 N.W. 33RD AVENUE**
CITY-STATE-ZIP **FT. LAUDERDALE FL 33309**

TITLE **DST** ☐ DELETE
NAME **EAGER, ALLEN**
STREET ADDRESS **1400 E. TOUHY AVE., #100**
CITY-STATE-ZIP **DES PLAINES FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

**300001784133
-04/17/96--01065--024
***200.00**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BARRY E. HERSHMAN, PRES.

4/15/96

847-299-3100

Date

Daytime Phone #

CR2E034 (12/95)