FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # V45050 A-ONE PAWNBROKER, INC. Principal Place of Business Mailing Address 408 S POWERLINE RD 408 S POWERLINE RD **DEERFIELD BEACH FL 33442** DEERFIELD BEACH FL 33442 2. Principal Place of Business Mailing Address 230 5. POWERLINE RD. 230 S. POWERLINE RD. Suite, Apt. #, etc Suite, Apt. #, etc. 22

FILED Apr 27 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/22/1992 FEI Number Applied For 65-0346657 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be DEER FIELD BEACH BEACH, FL DEER FIELD 23 28 Trust Fund Contribution Added to Fees Country U. S. A. This corporation owes or has paid the current year Intangible 17.5.A. Personal Property Tax due June 30, p. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name PLAVNICKY, RONALD J. PLA V NICKY. RONALD 408 S POWERLINE RD 82 **DEERFIELD BEACH FL 33442** 83 City DEER FIELD 84 BEACH

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 title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change : Addition TITLE PD 1.1 TITLE NAME PLAVNICKY, RONALD J. 1.2 NAME RD. PO WERLINE 408 S POWERLINE RD STREET ADDRESS 1.3 STREET ADDRESS CITY - ST - ZIP DEERFIELD BEACH FL 1.4 CITY - ST - ZIP DELETE ■ Addition Change 2.1 TITLE TITLE PLAVNICKY, JACK 2.2 NAME NAME STREET ADDRESS RR 1 BOX 3 N/A 2.3 STREET ADDRESS CITY-ST-ZIP **CLEMONS NY** 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE PLAVNICKY, RICHARD NAME 3.2 NAME STREET ADDRESS 107 TODDYHILL RD 3.3 STREET ADDRESS SANDY HOOK CT CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition TITLE 4.1 TITLE TD NAME PLAVNICKY, KENNETH 4. 2 NAME STREET ADDRESS 15 MOUNTAINVIEW 4.3 STREET ADDRESS ANSONIA CT CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby 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 an an attachment with an address

SIGNATURE:

CR2E034