FILED

2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCUMENT # J25534 1. Entity Name CHECK EXPRESS, INC.							Feb 28, 2002 8:00 am Secretary of State 02-28-2002 90037 001 ***900.00					
Principal Place of Business 1231 GREENWAY DRIVE STE. 800 IRVING TX 75038 US			Mailing Address 1231 GREENWAY DRIVE STE. 800 IRVING TX 75038 US									
2. Principal F	Place of Busin	ness	3. Mailing Address									
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & Star	te		City & State				4. F	El Number 59-2731112			oplied For	
Zip		Country	Zip Country				5. Certificate of Status Desired S8.75 Additional Fee Required					
				7. N	lame and Address of New Re							
						Name						
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD					Street A	Street Address (P.O. Box Number is Not Acceptable)						
_								- Vol. No. Av.			····	
PLANTATION FL 33324						City FL Zip Code						
8. The above	named entit	y submits this statement for th	ne purpose of changing its re	egistere	ed office o	r registere	d age	ent, or both, in the State of Flo	 rida.	l		
		FILE NOW!! After May 1, 200	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of Stat			10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.						
11.		OFFICERS AND DI	RECTORS	12.				DITIONS/CHANGES TO OFFI	CERS AND E	IRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COBP NEUSTAD 1231 GRE IRVING TO	it, donald Enway DR Suite 800 (75038	□ Delete			CEO	11	2	Į	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		, raymond e Enway dr suite 800 (75038	⊠ Delete			1334	ni.	06 TON, Exic 10 nwas DD, 15, X 1503	C. [Str - 8	Change	⊠ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOT SHIPOWIT 1231 GRE IRVING TO	ENWAY DR SUITE 800	☐ Delete			PID			_	₫ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHIPOWIT 1231 GRE IRVING TX	ENWAY DRIVE, STE. 800	,⊠ Delete			V/5 Joe 1231 IRV		r V, CONNER Veenway DK, S OF, TX 7503B	ا عد 80	□ Change	**Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		T ADDRESS ST-ZIP	Dal	00 VOV 7	ud C. Hemmi Ni Cardhal Exp	- د_	Change	** Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		T ADDRESS ST-ZIP	D Ros€ 500 Dal	- - - - - - - - - - - - - - - - - - -	Edward W. I escent court	T_	Change	À Addition	
indicated of the cor	on this repor poration or th	t or supplemental report is tru	e and accurate and that my red to execute this report as	′ signatu	ure shall h	ave the sa	me le	19.07(3)(i), Florida Statutes. I egal effect as if made under o la Statutes; and that my name	ath: that I am	an officer	or director	