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**Apr 08 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # **P35274 (0)**
1. Corporation Name
CURRENCY AUCTIONS OF AMERICA, INCORPORATED



Principal Place of Business: P.O. BOX 1525 CEDAR PARK TX 78630 US
Mailing Address: P.O. BOX 1525 CEDAR PARK TX 78630-1525 US

3. Date Incorporated or Qualified: **08/27/1991**
3a. Date of Last Report: **04/25/1996**
4. FEI Number: **74-2564515**
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 Place of Business (21-24)
2a. Mailing Address (25-28)

9. Name and Address of Current Registered Agent
**SANDE, JOE
1304 GLENFORD LANE
LAKELAND FL 33813**

10. Name and Address of New Registered Agent (81-85)

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: P	GLAZER, LEONARD P O BOX 111 NA FOREST HILLS, NY	1.1 TITLE	
NAME:		1.2 NAME	
STREET ADDRESS:		1.3 STREET ADDRESS	
CITY - ST - ZIP:		1.4 CITY - ST - ZIP	
TITLE: V	MINCHO, ALLEN P O BOX 1525 NA CEDAR PARK TX	2.1 TITLE	
NAME:		2.2 NAME	
STREET ADDRESS:		2.3 STREET ADDRESS	
CITY - ST - ZIP:		2.4 CITY - ST - ZIP	
TITLE: S	FOLEY, KEVIN P O BOX 573 NA MILWAUKEE WI	3.1 TITLE	5 MINCHO, ALLEN P.O. BOX 1525 NA CEDAR PARK, TX
NAME:		3.2 NAME	
STREET ADDRESS:		3.3 STREET ADDRESS	
CITY - ST - ZIP:		3.4 CITY - ST - ZIP	
TITLE: T	MINCHO, ALLEN P O BOX 1525 NA CEDAR PARK TX	4.1 TITLE	
NAME:		4.2 NAME	
STREET ADDRESS:		4.3 STREET ADDRESS	
CITY - ST - ZIP:		4.4 CITY - ST - ZIP	
TITLE:		5.1 TITLE	
NAME:		5.2 NAME	
STREET ADDRESS:		5.3 STREET ADDRESS	
CITY - ST - ZIP:		5.4 CITY - ST - ZIP	
TITLE:		6.1 TITLE	
NAME:		6.2 NAME	
STREET ADDRESS:		6.3 STREET ADDRESS	
CITY - ST - ZIP:		6.4 CITY - ST - ZIP	

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 included 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; 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, unchanged or on an attachment with an address.

SIGNATURE: *Allen Mincho* ALLEN MINCHO April 2, 1997 (210) 693-7500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CFR2E034 (9/96)