2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

FILED Feb 06, 2004 08:00 AM Secretary of State **DOCUMENT # 485828** 1. Entity Name SPEEDY'S ENTERPRISES, INC. Principal Place of Business Mailing Address 15537 BRAEMAR CT 15537 BRAEMAR CT MIAMI LAKES FL 33014 MIAMI LAKES FL 33014 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) 4. FEI Number Applied For City & State City & State 59-1618160 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GONZALEZ, JOSEFINA V Street Address (P.O. Box Number is Not Acceptable) 15537 BRAEMAR CT MIAMI LAKES FL 33014 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or primed name of registered agent and life if applicable DATE (NOTE, Registered Agent signature regulard when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 \Box Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. U00000037641 ☐ Change 02/06/04-80105-024 150.00 PD ☐ Addition TITLE ☐ Delete TiTi F GONZALEZ, SERGIO L NAME NAME STREET ADDRESS STREET ADDRESS 7278 BEDLINGTON RD CITY-ST-ZIP MIAMI LAKES FL 33014 CITY-ST-ZIP DT ☐ Delete TITLE Change | ☐ Addition TITLE GONZALEZ, JOSEFINA V. NAME NAME 15537 BRAEMAR CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI LAKES FL CITY-ST-ZIP ☐ Change Addition VPS ☐ Delete TITLE TITLE NAME GONZALEZ, RICHARD L. STREET ADDRESS STREET ADDRESS 345 S.W. 32ND RD CITY-ST-ZIP MIAMI FL CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME MAKES STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P ☐ Change ☐ Addition ☐ Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment

SIGNATURE: