2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Feb 09, 2006 08:00 AM **DOCUMENT # 485828 Secretary of State** 1. Entity Name SPEEDY'S ENTERPRISES, INC. Mailing Address Principal Place of Business 15537 BRAEMAR CT 15537 BRAEMAR CT MIAMI LAKES FL 33014 MIAMI LAKES FL 33014 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) 4. FEI Number Applied For City & State City & State 59-1618160 Not Applicat Country Zip 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.Q. Box Number is Not Acceptable) 15537 BRAÉMAR CT MIAMI LAKES FL 33014 City 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 printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May 5 After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Change ☐ Add::" TITLE ☐ Delete NAME NAME GONZALEZ, SERGIO L U00000426370 STREET ADDRESS 7278 BEDLINGTON RD STREET AODRESS 02/20/06-80042-001 150.00 CITY-ST-ZIP CITY-ST-ZIP MIAMI LAKES FL 33014 □ Airii ☐ Change DT ☐ Delete TITLE GONZALEZ, JOSEFINA V. HAME NAME STREET ADDRESS STREET ADDRESS 15537 BRAEMAR CT CITY-ST-ZIP CITY - ST- ZIP MIAMI LAKES FL ☐ Change Ark. VPS ☐ Delete TITLE NAME GONZALEZ, RICHARD L. STREET ADDRESS STREET ADDRESS 345 S.W. 32ND RD CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change ☐ Delete TITLE ☐ Addit TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CITY-ST-ZIP ☐ Change □ Addin ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7iP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 direction 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 1 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

| SignATURE | Description | Description