Requester's Name 5030 Champion Address Boca Raton, H. 33 City/State/Zip Phone #	6-219 SOO Office Use	0058158983 -06/18/0201062002 *****78.75 *****78.75
CORPORATION NAME(S) & DOCUM	TENT NUMBER(S), (if known):	!
1(Corporation Name)	(Document #)	
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2.		SEC SEC
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4. (Corporation Name)	. (Document #)	<u> </u>
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☐ Walk in ☐ Pick up time	L Ce	rtified Copy
☐ Mail out ☐ Will wait	Photocopy	ertificate of Status
NEW FILINGS	<u>AMENDMENTS</u>	-
Profit	Amendment	
Not for Profit Limited Liability	Resignation of R.A., Office Change of Registered Age	
Domestication	Dissolution/Withdrawal	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Other	☐ Merger	
OTHER FILINGS	REGISTRATION/QUALIFICATION	CATI
Annual Report	Foreign	· ' M
☐ Fictitious Name	Limited Partnership	\cup $ $
•	Reinstatement Trademark	
	Other	

Examiner's Initials

CR2E031(7/97)



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 19, 2002

BOCA CARDS 5030 CHAMPION BLVD., #6-219 BOCA RATON, FL 33496

SUBJECT: FASTTRACKTRADE, INC

Ref. Number: W02000017762

We have received your document for FASTTRACKTRADE, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 502A00039714

TRANSMITTAL LETTER

TÒ:	Registration Section Division of Corpor				·			
SUBJI	ECT: FASTTRACE	KTRA	DE, INC.					
		•	(Name o	f corporation - must include su	iffix)			
Dear S	ir or Madam:							
The en Exister	closed "Application nce", and check are s	by Fo submit	reign Corporation for a ted to register the above	Authorization to Transact Busi re referenced foreign corporation	iness in Floon to trans	orida", "Certid act business in	icate o i Flori	of da. '
Please	return all correspond	dence	concerning this matter	to the following:			<u>ن</u> • بر	
DOUG	KOVAL					•		
			(Na	ame of Person)	 	·		
	*		(Fi	rm/Company)				
5030	CHAMPION BLY	VD #	6-219					
		<u> </u>	-	(Address)				
BOCA	RATON, FL 3	3496		ي .	e			
				tate and Zip code)	31	A S		
						製	F	
For fur	ther information con	cernir	g this matter, please ca	·II·		SEE	rs rs	ĦLED
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	DOUG KOVA	L	at.	561-488-8031			ည	
-	(Name of Perso			ode & Daytime Telephone Nur	nber)			
Registr Divisio 409 E.	ET ADDRESS: ation Section n of Corporations Gaines St. ssee, FL 32399			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Enclose	ed is a check for the	follow	ing amount:					
	0.00 Filing Fee	_ 🗶	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy		\$87.50 Filing Certificate of Certified Cop	Status	; &

TÒ:

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1.	FASTTRACKTRADE, INC. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2.	<u>DELAWARE</u> 3. <u>01-0688784</u>
	(State or country under the law of which it is incorporated) (FEI number, if applicable)
4.	APRIL 13, 2002 (Date of incorporation) 5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")
6.	UPON QUALIFICATION
	(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7.	5030 CHAMPION BLVD #6-219 BOCA RATON, FL 33496
	(Principal office address)
	5030 CHAMPION BLVD #6-219 BOCA RATON, FL 33496
	(Current mailing address)
8.	BROKER-DEALER SEE
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida (Purpose(s))
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptation and Street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptation and Street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptation and Street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptation and Street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptation and Street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptation and Street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptation and Street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptation and Street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptation and Street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptation and Street address of Florida registered agent).
	Name: DOUG KOVAL SEE 3
Off	ice Address: 5030 CHAMPION BLVD #6-219
	BOCA RATON, FL , Florida 33496 (City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

	nes and business addresses of officers and/or ECTORS				
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Chairman	i:		<u> </u>		
Address:		*	<u> </u>		. 4
Vice Chair	rman:				
Address:					
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Address:				-	··
			<u> </u>	·	<u> </u>
Director: _				<u> </u>	- · · · · · · · · · · · · · · · · · · ·
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B. OFFI				LAG JU	· · · · · · · · · · · · · · · · · · ·
President:	DOUG KOVAL			2 ASSE	<u> </u>
					8
	5030 CHAMPION BLVD #6-219				 ·
	BOCA RATON, FL 33496			<u> </u>	<u></u>
Vice Presid	lent:	·		- <u> </u>	<u></u> j
Address:		- <u>- </u>	19-2		
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Secretary:	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		<u> </u>	
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	f necessary, you may attach an addendum to the	ne application list	ing additional officers ar	nd/or directors.	
3	(Signature of Chairman, Vice Chairman,	or any officer list	ed in number 12 of the a	nuliantian)	·
4 00110	S KOVAL			·	
<u></u>	(Typed or printed name and	capacity of perso	n signing application)	<u> </u>	· · · ·



The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FASTTRACKTRADE, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF JUNE, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FASTTRACKTRADE, INC." WAS INCORPORATED ON THE THIRTIETH DAY OF APRIL, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



Warriet Smith Windson Secretary of State

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020382133

AUTHENTICATION: 1829911

DATE: 06-13-02