2004 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

SIGNATURE:

Apr 23, 2004 8:00 am Secretary of State DOCUMENT # F42770 1. Entity Name 04-23-2004 90244 025 ***150.00 FASTER, INC. Mailing Address Principal Place of Business 7575 NW 70TH ST. 7575 NW 70TH ST. MIAMI, FL 33166 MIAMI, FL 33166 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. Chg-P 04212004 CR2E034 (10/03) City & State 4. FEI Number Applied For City & State 59-2131527 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required7. Name and Address of New Registered Agent ----- 6.- Name and Address of Current Registered Agent KAHAH, ALBERTO KAHAN, SERGIO Street Address (P.O. Box Number is Not Acceptable) 7575 NW 70TH STREET MIAMI, FL 33166 70th Street 8. The above named entity submitty 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 ag ALBERTOKAHAN SIGNATURE. Signature, typed or printed name of registered agent and title if explicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition KAHAN, ALBERTO NAME STREET ADDRESS 15579 MIAMI LAKEWY N208 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI LAKES, FL Delete TITLE ☐ Change ■ Addition KAHAN, SERGIO NAME NAME 15579 MIAMI LAKEWY N208 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI LAKES, FL CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME KAHAN, FANNY NAME KEMYY No SOR STREET ADDRESS 15579 MIAMI LAKE WAY NO 208 STREET ADDRESS CITY-ST-ZIP MIAMI LAKES, FL 33014 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITI F ☐ Change ☐ Addition 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

KAHAN

FFICER OR DIRECTOR

FILED