

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # J62741 1. Entity Name FASTCO OF FLORIDA, INC.		
Principal Place of Business 12250 N.W. 28TH AVE. MIAMI, FL 33167 US	Mailing Address 12250 NW 28 AVENUE MIAMI, FL 33167 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent JOHNSON, PENNI 12250 N.W. 28TH AVE. MIAMI, FL 33167		DO NOT WRITE IN THIS SPACE
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 _____ (NOTE: Registered Agent signature required when translating) <small>Signature, typed or printed name of registered agent and title if applicable</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE	PD	DO NOT WRITE IN THIS SPACE
NAME	MAXWELL, ROBERT D. SR.	
STREET ADDRESS	12250 N.W. 28TH AVE.	
CITY-ST-ZIP	MIAMI, FL	
TITLE	SDTV	
NAME	JOHNSON, PENNI	
STREET ADDRESS	12250 N.W. 28TH AVE.	
CITY-ST-ZIP	MIAMI, FL 33167	
TITLE	VPD	
NAME	MAXWELL, GARY	
STREET ADDRESS	157 WASHINGTON AVE	
CITY-ST-ZIP	SECAUCUS, NJ 07094	
TITLE	VPD	DO NOT WRITE IN THIS SPACE
NAME	DALE MAXWELL	
STREET ADDRESS	26 CARRIAGE WAY	
CITY-ST-ZIP	FREEHOLD, NJ 07728	
TITLE		DO NOT WRITE IN THIS SPACE
NAME		
STREET ADDRESS		DO NOT WRITE IN THIS SPACE
CITY-ST-ZIP		
TITLE		DO NOT WRITE IN THIS SPACE
NAME		
STREET ADDRESS		DO NOT WRITE IN THIS SPACE
CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 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 with an address, with all other like empowered.		
SIGNATURE: <i>Penni Johnson, CEO Penni Johnson</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		4/26/06 <small>Date</small>
		305-687-3500 <small>Daytime Phone #</small>



04242006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0030797	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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05/15/06-80011-023 150.00