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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

2001

DOCUMENT # P00000032253

. Corporation Name SUPER FAST GROUP, SERVICE, INC. Principal Place of Business

Mailing Address

FILED May 18, 2001 8:00 am Secretary of State

05-18-2001 91602 017 ***150.00

552785

			•				·			
315	MAJORCA AVENUE, SUIT	E #2	<u>!</u>				j ·			
CORA	AL GABLES FL 33134						DO NOT WRI	TE IN THIS	SPACE	
							3. Date Incorporated or Qualifed		-	
							MARCH/30/2000			•
2. Principal F	Place of Business	2a.	Mailing Address			···	4. FEI Number			Applied For
7		26	315 MAJORCA	AVE	ENUE		65-0994879		 	Not Applicable
Suite, Apt.	# air	120	Suite, Apt. #, etc.		11101				697	5 Additional
–	, 6.6.						5. Certificate of Status Desired			Required
2		[27]	#2				<u> </u>			
_ Ci엃& Sta	ite	—	City & State				6. Election Campaign Financing		•	30 May Be
3		28	CORAL GABLE		FL		Trust Fund Contribution		Add	ed to Fees
Zip	Country	<u> </u>	Zip	Con	•		8. This corporation owes the curre	ant year Int	_=	
4	25	29	33134	30 MT	AMI-I	ADE	Personal Property Tax.		Yes	□No
	9. Name and Address of Current	Regist	ered Agent				10. Name and Address of New R	egistered	Agent	
				`]	81 Nar	ne	*			
P/V RA	FAEL VILLOTA			- 1	82 Stre	at Addron	s (P.O. Box Number is Not Accepta	hia)		
	5 MAJORCA AVENUE, #2	2	•	}	3116	et Modres	is (F.O. BOX Number is Not Accepta	uid)		
	-	3134		t	83					<u></u> .
	THE GADDED IT 33	3134		4						
	-	-			84 City				85 Z	ip Code
			'				1		<u> </u>	
11. Pursuant	to the provisions of Sections 607.0502 registered agent, or both, in the State o	and 60 f Florid:	i7.1508, Florida Statutes a. Such change was auf	s, the ab bodzed	men-evoc	ed corpora	ation submits this statement for the parties accept is board of directors. I bereby accept	ourpose of the annois	changing Ilment as	its registered
agent. I a	am familiar with, and accept the obligation	ons of,	Section 607.0505, Florid	ia Statu	ites.		a board of directors. Thereby decep	c appon		regionales
SIGNATURE			•	1 31	4. 4	,				
0.014.110.12	Signature, typed or printed name of registered agent	and title if	applicable. (NOTE: R	legistered /	Agent signati	re required w	hen reinstating)	OATE		
12.	. OFFICERS AND	DIREC		13.			ADDITIONS/CHANGES TO OFF	ICERS AN		
TILE	P/V		DELETE	1.1 m	Œ "		•		Chang	e 🔲 Addition
NAME	RAFAEL VILLOTA			1.2 NA	ME	1				
STREET ADDRESS	315 MAJORCA AVENU	#2		1.3 STR	REET ADDRE	\$s.				l
CITY-ST-ZIP	CORAL GABLES FL 3									
TITLE				1.4 (1)	Y-ST-ZIP	-				
			☐ DELETE	21 7171	Y-ST-ZIP LE			· ·	☐ Chang	e 🔲 Addition
	1	-		21 1111	UE .				Chang	e 🔲 Addition
				21 TITL 22 NAA	LE ME				☐ Chang	e 🗀 Addition
STREET ADDRESS		•		21 TITL 22 NAA 23 STR	LE ME REET ADORE	ss		·	☐ Chang	e 🔲 Addition
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14. 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 annual report of supplemental annual 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 12 or Block 13 of changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS 8.4 CITY-ST-ZIP

SIGNATURE:

PRESIDENT RAFAEL

VILLOTA

04/15/2001