

5/1/01

FILED
Aug 16, 2001 8:00 am
Secretary of State

05-01-2001 90078 036 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000083087

1. Entity Name
FASTRAC, INC.

Principal Place of Business
5012 E. BROADWAY
TAMPA FL 33619

Mailing Address
5012 E. BROADWAY
TAMPA FL 33619



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
APPLIEDDFOR

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GHANNAD, HAMID
5012 E. BROADWAY
TAMPA FL 33619

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$550.00.
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GHANNAD, HAMID 14021 SHADY SHORES DR. TAMPA FL 33613 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GHANNAD, SHAHNAZ 14021 SHADY SHORES DR. TAMPA FL 33613 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED X

SHAHNAZ GHANNAD
 Date: 8-7-2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2034 (5/01)

Attachment

11405

P06660083087

5012 E. Broadway Ave.

Tampa, FL 33619

Telephone: 813-241-4610

Fax: 813-241-4810

GOLF OIL CORPORATION

8/7/2001

Florida Department Of State
P.O. Box 6327
Tallahassee, Fl. 32314

To Whom It May Concern:

Please find attached the (2001 UNIFORM BUSINESS REPORT) signed by corporate officer

Shahnaz Ghannad , indicating that the (FEI) has been applied for.

Presently (FASTRAC, INC.) is inactive during our changeover process from (GOLF OIL CORP.)
to FASTRAC, INC.

We regret any inconvenience our changeover may have caused.


Ken Dufault
Managing Consultant

GOLF OIL CORPORATION (THE NEXT TIGER)