

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000004931

Entity Name: FAST TRANS, INC.

FILED  
Apr 20, 2009  
Secretary of State

## Current Principal Place of Business:

12482 NW 38 AVE  
OPA LOCKA, FL 33054

## New Principal Place of Business:

## Current Mailing Address:

12482 NW 38 AVE  
OPA LOCKA, FL 33054

## New Mailing Address:

FEI Number: 74-3030871

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SOSA, JAVIER  
7088 W 4 LANE  
HIALEAH, FL 33014 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: SOSA, JAVIER  
Address: 7088 W 4 LANE  
City-St-Zip: HIALEAH, FL 33014

Title: VP ( ) Delete  
Name: SOSA, ISABEL  
Address: 940 W 43 ST  
City-St-Zip: HIALEAH, FL 33012

Title: S ( ) Delete  
Name: SOSA, PEDRO  
Address: 940 W 43 ST  
City-St-Zip: HIALEAH, FL 33012

Title: D ( ) Delete  
Name: SOSA, JORGE  
Address: 3906 YUCALAN PKWY  
City-St-Zip: CAPE CORAL, FL 33993

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAVIER SOSA

PSTD

04/20/2009

Electronic Signature of Signing Officer or Director

Date