## 2003 FOR PROFIT CORPORATION

## Sep 17, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** P02000025399 DOCUMENT # 1. Entity Name 09-17-2003 90020 013 \*\*\*150.00 MICROFAST SOLUTIONS, INC. Principal Place of Business Mailing Address 841 WEST 53RD STREET 841 WEST 53RD STREET HIALEAH FL 33012 HIALEAH FL 33012 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State 4. FEI Number City & State Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ARMAS, RUBEN Street Address (P.O. Box Number is Not Acceptable) 841 WEST 53RD STREET HIALEAH FL 33012 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Change ☐ Addition TITLE ☐ Delete TITLE ARMAS, RUBEN NAME NAME 841 WEST 53RD STREET STREET ADDRESS STREET ADDRESS HIALEAH FL 33012 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Delete \_ ☐ Addition ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Delete ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Delete ☐ Change STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE

with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information for the same legal effect as if made under eath; that I am an officer or director for ownered to execute this coordinate and that my name appears in Block 10 or Block 11 if I hereby certify that the information supp indicated on this report or supplement of the corporation or the received

STREET ADDRESS

CITY-ST-7IP

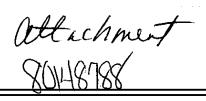
NAME

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Daytime Phone #



September 5, 2003

Florida Department of State Division of Corporations Uniform Business Report Filings PO Box 1500 Tallahassee, FL 32302-1500

Re: 2003 Uniform Business Report

Microfast Solutions, Inc. – Document #P02000025399

Dear Sir/Madam:

This is to advise that this is the first 2003 Uniform Business Report we receive for Microfast Solutions, Inc.

Thus, we are requesting that the Florida Department of State, Division of Corporations please waive the late fee of \$400.00.

Enclosed please find check #1008 for \$150.00 for the filing fee.

Thank you very much.

Sincerely,

Rene F. Leoncio

Enclosures: Uniform Business Report Check # 1008

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