

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 13, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000050721

1. Entity Name
SPEEDY INSPECTION CORP.



Principal Place of Business
**17541 NE 7TH PLACE
NORTH MIAMI BEACH, FL 33162**

Mailing Address
**17541 NE 7TH PLACE
NORTH MIAMI BEACH, FL 33162**



04282004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-3658431

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**TABANNEJAD, MORIS
17541 NE 7TH PL
NORTH MIAMI BEACH, FL 33162**

**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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**U000000160158
05/13/04-80009-024 150.00**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DP
TABANNEJAD, MORIS
17541 NE 7TH PLACE
NORTH MIAMI BEACH, FL 33162**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DST
CARRION, IVAN
17541 NE 7TH PLACE
NORTH MIAMI BEACH, FL 33162**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/26/04

Date

305-866-5480

Daytime Phone #