	R PROFIT CORPORAT	
UNIFORM	BUSINESS REPORT	(UBR
DOCUMENT #  1. Entity Name	P02000093599	
FASTBACK MARKETING	G, INC.	



Principal Place of Business 311 N. KNOWLES AVENUE #102 WINTER PARK FL 32789

2. Principal Place of Business

Mailing Address
311 N. KNOWLES AVENUE

WINTER PARK FL 32789

3. Mailing Address

FILED

03 OCT 15 AM 11: 25

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Suite, Apt. #, etc. Suite, Apt. #, etc.			HEIN	S	ATEMENT	MAKING (	CHANGES	03		
City & State City		City & State			4. FF			Mp No		
Zip	Country	Zip Coun		***	5. Certificate of Status Desired			\$8.75 Additional Fee Required		
6. Nam	e and Address of Current Regis	tered Agent			~-7:-Ni	ame and Address of New Reg				
			Nan	Name						
CHONG, STEPHEN ESQ.		Stre	Street Address (P.O. Box Number is Not Acceptable)							
801 N. MAGNOLIA AVENUE			<u> </u>							
SUITE 201									1	
ORLANDO FL 32803		City				FL	Zip Code	<del></del>		
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										
		1								
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00					<ol><li>Election Campaign Finan Trust Fund Contribution.</li></ol>	cing _		May Be		
Make Check Payable	to Florida Department of State	P								
10.	OFFICERS AND DIREC	CTORS	11.		ADD	DITIONS/CHANGES TO OFFICE	ERS AND E	DIRECTORS	3 IN 11	
TITLE D		□ Delete	TITLE				[	Change	Addition	
NAME PARK, JA			NAME							
	EVILLEA DRIVE		STREET ADDRE	SS						
CITY-ST-ZIP ORLANDS	) FL 32822		CITY-ST-ZIP							
TITLE D		☐ Delete	TITLE					Change	Addition	
NAME PARK, CH	HONG		NAMÉ .			20002382	958	2	_ (	
	DDRESS 311 N. KNOWLES AVENUE #102		STREET ADDRE	ss	1{	<b>200023829582</b> 10/15/0301076009 **158.75				
			CITY-ST-ZIP							
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STREET ADDRESS			STREET ADDRE	SS						
CITY-ST-ZIP			CITY-ST-ZIP							
12. I hereby certify that t	ne information supplied with this fil	ing does not qualify for the	he exemption	stated in Se	ction 11	9 07(3)(i) Florida Statutes Lfu	rther certify	that the in	formation	

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:** 



Phone: (407) 677-8282 Fax: (407) 677-9101

October 13, 2003

Florida Dept. of State
ATTN: Uniform Business Report/REINSTATEMENTS
P.O.Box 1500

Talahassee, FL 32302-1500

To Whom It May Concern

I'm writing this on behalf of my clients, Fastback Marketing, Inc.. They never received the original Uniform Business Report, just this second one noting that it was due on Sept 30. As this was the first time being late, and since they were unaware of it we are requesting an abatement of the late fees. I am enclosing their check in the amount of \$158.75, to cover the fee and a Certificate of Status. Thank you for your assistance in this matter.

Sincerely

Mike Hamilla President