2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Jun 03, 2005 8:00 am Secretary of State

DOCUMENT # P0400066822 1. Entity Name FAST ACTION INVESTMENT GROUP INC.					06-03-2005 90003 032 ***150.00				
Principal Place 2210 SW 89 MIAMI, FL 30	IH CT	Mailing Address 2210 SW 89TH CT MIAMI, FL 33165			٠	5005	331	9	
2. Principal P 12912 Suite, Apt.	lace of Business Sw88* Terr. #, etc.	3. Mailing Address 129/2 S.w. 8 Suite, Apt. #, etc.	8= Terr	02252005	Chg-P	CR2E034 (1	11219 1124		
City & State	· · · · · · · · · · · · · · · · · · ·	City & State		4. FEI Number				lied For	
Zip	Country Country	MIAMI. FL	ountry	13-42	78889			Applicable	
3318	6 HIAMI - DADE	33186 H	1471-340			Fee F	5 Addit Required		
	6. Name and Address of Current F	legistered Agent	Name .		ddress of New R				
SPIECEL & UTRERA, P.A.			JANEL C. DIMMOND						
1 840 SW 22ND ST. 4 TH FLOOR			Street Address (P.O. Box Number is Not Acceptable)						
MIAMI, FL 33146			12912 SW 88 TERR.						
	\sim 1 .	. 1	Cibi	11441			ip Code		
8. The above the obligat	named entity submits this catemon for	e kupos o changing its regis		gistered agent, or both,	in the State of Flo		318 ar with, a		
SIGNATURE	Carrier 1	XXXXX			ď	2-25-	05		
	Signature, types of printed name of salared as 1 a	nd site applicable. (NOTE: Regi	stered Agent signature re	equired when reinstating)		DATE			
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0	9. Election Campaign F Trust Fund Contributi		\$5.00 May Be Added to Fees	٠	: .	•	• •	
10.	OFFICERS AND I		11.	ADDITIONS/C	HANGES TO OFF				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DIAMOND, JANEL C -2210 SW 80TH GT - MIAMI, FL 33166		I .	12912 SW 8 HINNI - F	-	X	hange .	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP	VD PALACIOS, ANA 2210 SW 89TH GT MIAMIT, PL 33165			LIOB N.G. 3 Hongergab			Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_		NAME STREET ADDRESS CITY-ST-ZIP			· _	hange:	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	:	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition	
TITLE NAME STREET ADDRESS CIFY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	☐ Addition	
12. I hereby indicated of the cor	certify that the information supplied with on this report or supplemental report of portation or the receiver of trustee empore the contraction or the receiver of trustee empore the contraction or the receiver of trustee empore the contraction of the contracti	this fling does not qualify for the true and many s	exemption stated gradure shall have equired by Chapte	in Section 119.07(3)(i), e the same legal effect er 607, Florida Statutes	Florida Statutes. as if made under of and that my name	I further certify the bath; that I am an e appears in Bloo	at the inf officer c	formation or director Block 11 if	