

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

4/1

**FILED**  
**Jun 19, 2006 8:00 am**  
**Secretary of State**

04-17-2006 90364 048 \*\*\*150.00

**DOCUMENT # P04000084791**

**1. Entity Name**

**FAST SOLUTIONS AUTO SERVICES CORPORATION**



**Principal Place of Business**

**8725 NW 117TH STREET  
BAY 2  
HIALEAH GARDENS, FL 33018**

**Mailing Address**

**8725 NW 117TH STREET  
BAY 2  
HIALEAH GARDENS, FL 33018**

**DO NOT WRITE IN THIS SPACE**



01092006 No Chg-P CR2E034 (11/05)

**4. FEI Number**

**20-1193673**

**Applied For**

**Not Applicable**

**5. Certificate of Status Desired**

☐

**\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**CARRERO, JOSE  
8949 NW 120TH STREET  
HIALEAH GARDENS, FL 33018**

**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, 2006 Fee will be \$550.00**

**9. Election Campaign Financing  
Trust Fund Contribution.**

☐

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

**10. OFFICERS AND DIRECTORS**

**TITLE PD  
NAME CARRERO, JOSE  
STREET ADDRESS 8949 NW 120TH STREET  
CITY - ST - ZIP HIALEAH GARDENS, FL 33018**

**TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP**

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IN THIS SPACE**

**12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

**6/15/06 786-235-0991**