

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000081883

Entity Name: BE FAST TRUCKING, INC

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

361 SW MILLARD DRIVE
PORT ST LUCIE, FL 34953 US

New Principal Place of Business:

1066 SW MCCOMKLE AVENUE
PORT ST LUCIE, FL 34953 US

Current Mailing Address:

361 SW MILLARD DRIVE
PORT ST LUCIE, FL 34953 US

New Mailing Address:

1066 SW MCCOMKLE AVENUE
PORT ST LUCIE, FL 34953 US

FEI Number: 26-3304151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAXMY'S CARRIER SERVICES
9090 NW SOUTH RIVER DR
STE 2
MEDLEY, FL 33166 US

Name and Address of New Registered Agent:

PRINCE, BEATRIZ
1066 SW MCCOMKLE AVENUE
PORT ST LUCIE, FL 34953 US

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.

SIGNATURE: BEATRIZ PRINCE

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GONZALEZ, LUIS F
Address: 8115 NW 171 STREET
City-St-Zip: PALM SPRINGS NORTH, FL 33015 US

Title: VP (X) Delete
Name: PRINCE, BEATRIZ
Address: 361 SW MILLARD DR
City-St-Zip: PORT ST LUCIE, FL 34953 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: BEATRIZ, PRINCE
Address: 1066 SW MCCOMKLE AVENUE
City-St-Zip: PORT ST LUCIE, FL 34953 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BEATRIZ PRINCE

PSTD

04/27/2009

Electronic Signature of Signing Officer or Director

Date