FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P93000020892 (4)

ACCU-FAST, INC.

Principal Place of Business

Mailing Address

FILED Apr 21 1997 8:00am Secretary of State



490 BW 196TH MIAMI FL 8318		430 SW 136TH PLACE MIAMI FL 33184-1052								
						3. Date Incorporated or Qualified 03/19/1993		ate of Last 20/1996	Report	
2. Principal Pl	ace of Business	2a. Mailing Address 26	├ ¬			4. FEI Number 65-0412047	· · · · · · · · · · · · · · · · · · ·		Applied For Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	27			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State	28			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 24	Country 25	Zip 29	30 Cou	ntry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
010		of Current Registered Agent		81	Name	10. Name and Address of New I	registered	Agent		
	TELLON, YVETTE 3 S.W. 131ST PLACE				Name					
MIAMI FL 33175				82	Street A	eet Address (P.O. Box Number is Not Acceptable)				
				83						
				84	City		FL	85 Zip	Code	
11. Pursuant t	to the provisions of Section	s 607.0502 and 607.1508, Florida Sta	tutes, the at	OOVE	named c	corporation submits this statement for the	purpose o	f changing	its registered	
agent. I at	egistered agent, or both, in m familiar with, and accept	i the state of Florida. Such change wa t the obligations of, Section 607.0505,	is authorized Florida Stat	o by utes	tne corpo s.	oralion's board of directors. I hereby acc	ept the app	oointment a	s registered	
SIGNATURE				· ·						
12.		egistered agent and title II applicable. (N CERS AND DIRECTORS	IOTE: Registered	1 Age	n) signature n	equired when reinstating) ADDITIONS/CHANGES TO OFF	DATE	DIRECTO	RS IN 12	
TITLE	Ρ'	DELETE.	1,110	TLF	·			☐ Change	Addition	
NAME	CASTELLON, YVETTE		1.2 NA	ME					[3	
STREET ADDRESS	430 SW 138TH PLACE	E	1.3 STREET AD		ADDRESS				li i	
CITY-ST-ZIP	MIAMI FL 33184	1,4 CI	TY-S	1 - ZIP						
TITLE			2.1 11	2.1 TITLE				☐ Change	Addition C	
NAME	•		2.2 N							
STREET ADDRESS				2.3 STREET ADDRESS						
CITY-ST-ZIP		DOLLA	2. 4 CATY - ST - ZAP 3.4 TATLE					110		
TITLE	DELETE							Change	☐ Addition	
NAME STREET ADORESS			3 2 NA		.0014444					
CITY-ST-ZIP					ADDRESS				1	
TITLE		DELETE	4.1 TIT		91-21			Change	Addition	
NAME			4, 2 N							
STREET ADDRESS			4.3 S1	REET	ADDRESS					
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NAME			5.2 NA	MÉ	ł				ļ	
STREET ADDRESS			5.3 ST	REFT	ADDRESS					
CITY-ST-ZIP			5.4 CI		1-ZIP					
TITLE			. E	.1 TITLE				L.] Change	☐ Addition	
NAME			6 2 NA							
STREET ADDRESS			- 8		ADDRESS				1	
CITY-ST-ZIP			6400	IY-S	T-21P					

14. I do 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 annual report or supplemental annual 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 12 of Block 13 if changed of on an attachment with an address.

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