

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
32399-0001

APPROVED
AND
FILED

SEAL 11 APR 1996

DOCUMENT # P93000028314 (1)

1. Corporation Name

FAST START INDUSTRIES, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

5041 THYME DR
PALM BEACH GARDENS FL 33418

Mail Address

5041 THYME DR
PALM BEACH GARDENS FL 33418

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date of Incorporation or Qualification		3a. Date of Last Report	
21		26		04/16/1993		04/15/1994	
22		27		4. FID Number		Applied For	
23		28		65-0402958		Not Applicable	
24		29		5. Certificate of Status Desired		Not Applicable	
25		30		6. Election Campaign Financing		Not Applicable	
				Trust Fund Contribution		Not Applicable	
				7. This Corporation has liability for intangible tax under 1989 Code, Florida Statutes		Not Applicable	
				Yes		No	

9. Name and Address of Current Registered Agent

LEWIS, LONNIE
5041 THYME DR
PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.05(1) and 607.15(1) Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.05(1) Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Registered Agent

Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	D	1. TITLE	Change Addition
2. NAME	LEWIS, LONNIE	2. NAME	
3. STREET ADDRESS	5041 THYME DR	3. STREET ADDRESS	
4. CITY, STATE, ZIP	PALM BEACH GARDENS FL 33418	4. CITY, STATE, ZIP	
5. TITLE		5. TITLE	Change Addition
6. NAME		6. NAME	
7. STREET ADDRESS		7. STREET ADDRESS	
8. CITY, STATE, ZIP		8. CITY, STATE, ZIP	
9. TITLE		9. TITLE	Change Addition
10. NAME		10. NAME	
11. STREET ADDRESS		11. STREET ADDRESS	
12. CITY, STATE, ZIP		12. CITY, STATE, ZIP	
13. TITLE		13. TITLE	Change Addition
14. NAME		14. NAME	
15. STREET ADDRESS		15. STREET ADDRESS	
16. CITY, STATE, ZIP		16. CITY, STATE, ZIP	
17. TITLE		17. TITLE	Change Addition
18. NAME		18. NAME	
19. STREET ADDRESS		19. STREET ADDRESS	
20. CITY, STATE, ZIP		20. CITY, STATE, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(2)(b) Florida Statutes. I further certify that the information is based on the annual report or supplemental annual report, true and accurate and that my signature shall have the same legal effect as if made under oath. That I am an officer or shareholder of the corporation or the registered business name used to file this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report. I am an individual with an address.

SIGNATURE: *Lonnie Lewis as Director* LONNIE LEWIS

4/28/95 4078401310