2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED **DOCUMENT # P93000049975** 1. Entity Name 05 NOV 10 PM 6: 83 FAST MANAGEMENT, INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 51 COMPASS LANE 51 COMPASS LANE FT LAUDERDALE, FL 33308 FT LAUDERDALE, FL 33308 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 65-0423627 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FAST, JACOB Street Address (P.O. Box Number is Not Acceptable) 51 COMPASS LANE FT LAUDERDALE, FL 33308 Zip Code 8. The above named exity 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 stered agent the obligation: SIGNATURE FILE NOW!!! FEE IS \$750.00 After January 1, 2006, Fee will be \$900.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Addition ☐ Change PΩ ☐ Delete TITLE TIRLE FAST, JACOB NAME NAME 51 COMPASS LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE, FL 33308 CITY-ST-ZIP Addition STD ☐ Delete TITLE TATLE NAME NAME FAST, ANN STREET ADDRESS STREET ADDRESS 51 COMPASS LANE FT LAUDERDALE, FL 33308 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITI F NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Defete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiper 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 atta **SIGNATURE** TURE AND TYPED OR PRINTED