FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 26 AM 7:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000020089 (6)**

1. Corporation Name
FAST AUTO LOANS, INC.

Principal Place of Business	Mailing Address
1010 S OCEAN BLVD PH 9 POMPANO BEACH FL 33062	1010 S OCEAN BLVD PH 9 POMPANO BEACH FL 33062

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/11/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address	4. FEI Number / Applied For / Not Applicable
21 2490 N. FEDERAL HWY.	26	65-0474877
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
City & State 23 POMPANO BCH., FL.	City & State 28	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
Zip / County 24 33064 / 25 BROWARD	Zip / County 29 / 30	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
GERARDI, VINCENT 1010 S OCEAN BLVD PH 9 POMPANO BEACH FL 33062	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Vincent Gerardi PRES — 4-21-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☒ Change ☐ Addition D-P-T
NAME	GERARDI, VINCENT	1.2 NAME	GERARDI, VINCENT
STREET ADDRESS	1010 S OCEAN BLVD PH 9	1.3 STREET ADDRESS	1010 S OCEAN BLVD PH9
CITY-ST-ZIP	POMPANO BEACH FL 33062	1.4 CITY-ST-ZIP	POMPANO BEACH, FL. 33062
TITLE	D	2.1 TITLE	☒ Change ☐ Addition D-VP
NAME	MANFREDONIA, SALVATORE	2.2 NAME	MANFREDONIA, SALVATORE
STREET ADDRESS	801 S FEDERAL HWY #1017	2.3 STREET ADDRESS	1360 SO. OCEAN BLVD SUITE 2207
CITY-ST-ZIP	POMPANO BEACH FL 33062	2.4 CITY-ST-ZIP	POMPANO BEACH, FL. 33062
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Vincent Gerardi VINCENT GERARDI 4-21-95 305-781-5921
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

010497 CP