2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000023510

Entity Name: FAST BREAK, INC.

FILED Jan 15, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1505 STATE ROAD 78 W OKEECHOBEE, FL 34974				2341 N E 7TH STREET OKEECHOBEE, FL 34972			
Current Mailing Address:				New Mailing Address:			
1505 STATE ROAD 78 W OKEECHOBEE, FL 34974				2341 N E 7TH STREET OKEECHOBEE, FL 34972			
FEI Number:	65-0886001	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Des	sired()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
MARSOCCI, FRANKLIN D JR. 1505 STATE ROAD 78 W OKEECHOBEE, FL 34974 US				MARSOCCI, FRANKLIN D JR. 2341 N E 7TH STREET OKEECHOBEE, FL 34972 US			
The above in the State		bmits this statement for the pur	rpose o	f changing it	s registered o	office or registered age	nt, or both,
SIGNATURE: FRANKLIN D MARSOCCI JR.				01/15/2007			
Electronic Signature of Registered Agent				Date			
Election Cam	paign Financing	Frust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () E MARSOCCI, FRA 3007 HWY. 70 E/ OKEECHOBEE, F	AST		Title: Name: Address: City-St-Zip:	D (X MARSOCCI, FF 2341 N E 7TH S OKEECHOBEE	STREET	
Title: Name: Address: City-St-Zip:	D () D MARSOCCI, LINE 3007 HYW 70 EA OKEECHOBEE, F	ST		Title: Name: Address: City-St-Zip:	D (X MARSOCCI, LII 2341 N E 7TH S OKEECHOBEE	STREET	
Title: Name: Address: City-St-Zip:	D () E MARSOCCI, FRA 2201 SW 28 STR OKEECHOBEE, F	EET # 73		Title: Name: Address: City-St-Zip:	()) Change ()Addition	
Title: Name: Address: City-St-Zip:	D () C MARSOCCI, DEB 2210 SW 28 STR OKEECHOBEE, F	EET #73		Title: Name: Address: City-St-Zip:) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: FRANKLIN D MARSOCCI JR. D 01/15/2007