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

PROFIT CORPORATION ANNUAL REPORT

1999

Suite, Apt. #, etc.

City & State

Zic



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 03, 1999 8:00 am **Secretary of State**

03-03-1999 90106 001 ***150.00

DOCUMENT #	P95000065781

Country

9. Name and Address of Current Registered Agent

25

PENDLETON, ALEXA M

1261 KNECHT RD NE PALM BAY FL 32905

1. Corporation Name SPEEDY FINGERS, INC. Mailing Address Principal Place of Business 1261 KNECHT RD NE 1261 KNECHT RD NE PALM BAY FL 32905 PALM BAY FL 32905 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 08/24/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Brward

Suite, Apt. #, etc.

City & State

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Zip

Applied For 54-1232538 Not Applicable \$8.75 Additional

5. Certifcate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing П Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible

Z Yes Personal Property Tax. 10. Name and Address of New Registered Agent 81 Name

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

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.

Country

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SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. □ DELETE 1.1 TITLE TITLE PENDLETON, ALEXA M NAME 12 NAME STREET ADDRESS 1261 KNECHT RD NE 1.3 STREET ADDRESS PALM BAY FL 32905 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ DELETE TITLE 2.1 TITLE PERONARD, O LOUIS 2.2 NAME NAME 1261 KNECHT RD NE 2.3 STREET ADORESS STREET ADDRESS PALM BAY FL 2.4 CITY-ST-ZIP ☐ DELETE 3 1 TITLE ☐ Change ☐ Addition TITIE. 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ DELETE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

14. 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 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

2/16/99 407 723-2381

CR2E034 (11/98)