

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2001 8:00 am
Secretary of State

0086358

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03-26-2001 90042 001 ***150.00

1. Entity Name

FAST-TRACK MESSENGER SERVICE, INC.

Principal Place of Business

6315 NW 64 ST BAY 1
 MIAMI FL 33166
 US

Mailing Address

18000 NW 68TH AVE.
 APT. 316
 MIAMI FL 33015
 US

2. Principal Place of Business

8130 N.W. 71 ST.

3. Mailing Address

19160 S.W. 29 CT.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
MIAMI, FL

City & State
MIRAMAR, FL

4. FEI Number **65-0761002**

Applied For
 Not Applicable

Zip
33166

Country
USA

Zip
33029

Country
USA

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LOPEZ, MARTIN
18000 NW 68TH AVE.
APT. 316
MIAMI FL 33015

7. Name and Address of New Registered Agent

Name **MARTIN LOPEZ**
 Street Address (P.O. Box Number is Not Acceptable)
19160 S.W. 29 CT.
 City **MIRAMAR, FL** Zip Code **33029**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *Martin Lopez* **MARTIN LOPEZ**

2/19/01

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
 NAME **PD LOPEZ, ELIZABETH**
 STREET ADDRESS **3235 W. 14TH AVE.**
 CITY-ST-ZIP **HIALEAH FL 33012**

TITLE Change Addition
 NAME **Elizabeth Rodriguez**
 STREET ADDRESS **3235 W. 14AVE.**
 CITY-ST-ZIP **Hialeah, FL 33012**

TITLE Delete
 NAME **D LOPEZ, MARTIN**
 STREET ADDRESS **19160 S.W. 29TH CT.**
 CITY-ST-ZIP **MIAMI FL 33029**

TITLE Change Addition
 NAME **MARTIN LOPEZ**
 STREET ADDRESS **19160 S.W. 29 CT.**
 CITY-ST-ZIP **MIRAMAR, FL 33029**

TITLE Delete

TITLE Change Addition

TITLE Delete

TITLE Change Addition

TITLE Delete

TITLE Change Addition

TITLE Delete

TITLE Change Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Martin Lopez*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/19/01 **(305) 392-6363**
 Date Daytime Phone #

CR2E034 (10/00)