

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000060714

FILED
Apr 19, 2003
Secretary of State

Entity Name: FASTEREF CORP.

Current Principal Place of Business:

6801 SW 14TH ST
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

6801 SW 14TH ST
MIAMI, FL 33144

New Mailing Address:

FEI Number: 65-0849131

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: VELAZQUEZ, ECTIS A
Address: 5815 SOUTHWEST 107TH PLACE
City-St-Zip: MIAMI, FL 33173

Title: SVD () Delete
Name: VELAZQUEZ, JOELIN
Address: 5815 SOUTHWEST 107TH PLACE
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: VELAZQUEZ, ECTIS A
Address: 6801 SW 14TH ST
City-St-Zip: MIAMI, FL 33144

Title: SVD (X) Change () Addition
Name: VELAZQUEZ, JOELIN
Address: 6801 SW 14TH ST
City-St-Zip: MIAMI, FL 33144

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ECTIS A. VELAZQUEZ

PTD

04/19/2003

Electronic Signature of Signing Officer or Director

_____ Date