

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90739 031 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

90122985

DOCUMENT # P99000096074 1. Entity Name SPEEDY NEEDS, INC.			
Principal Place of Business 3014 OAKHILL ROAD CLEARWATER, FL 33759		Mailing Address 3014 OAKHILL ROAD CLEARWATER, FL 33759	
2. Principal Place of Business 2141 CRYSTAL GROVE DR.		3. Mailing Address 2141 CRYSTAL GROVE DR.	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State LAKELAND, FL		City & State LAKELAND, FL	
Zip 33801		Zip 33801	
Country U.S.		Country U.S.	
4. FEI Number 59-3606108		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		☐ CHECK HERE IF MAKING CHANGES	
6. Name and Address of Current Registered Agent LAKHANI, SALIM S 3014 OAKHILL RD CLEARWATER, FL 33758		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 2141 CRYSTAL GROVE DR. City LAKELAND FL Zip Code 33801	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <i>[Signature]</i> (Signature must be printed name of registered agent and title if applicable)		DATE 4/30/03 (NOTE: Registered Agent signature required when reappointing)	
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD LAKHANI, SALIM S 3014 OAKHILL ROAD CLEARWATER, FL 33759	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T, D LAKHANI, SALIM 2141 CRYSTAL GROVE DR. LAKELAND, FL 33801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD LAKHANI, RAFEO R 3014 OAKHILL ROAD CLEARWATER, FL 33759	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change ☒ Addition ☐
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, D MEENAZ LAKHANI 2141 CRYSTAL GROVE DR. LAKELAND, FL 33801	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change ☐ Addition ☐
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S, D SADIQ LAKHANI 2141 CRYSTAL GROVE DR. LAKELAND, FL 33801	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change ☐ Addition ☐
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete ☐	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change ☐ Addition ☐
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete ☐	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change ☐ Addition ☐
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>[Signature]</i> (Signature and typed or printed name of signing officer or director)		DATE 4/30/03 Daytime Phone #	

CR2E034 (10/02)