

# ANNUAL REPORT

**DOCUMENT # 679781**

1. Entity Name  
**THE BEST CARPET CLEANING SYSTEM, INC.**



**FILED**  
**Apr 30, 2008 08:00 AM**  
**Secretary of State**

Principal Place of Business  
400 KINGS PT DR 724  
NORTH MIAMI BEACH, FL 33160

Mailing Address  
P.O. BOX 60563  
NORTH MIAMI BEACH, FL 33160



04272008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2015923	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

**6. Name and Address of Current Registered Agent**

TARRADELL, EUSEBIO F.  
4840 NW 184 TERR.  
MIAMI, FL 33055

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

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

U00000333535  
05/22/08-80100-013-150.00

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	CRISTANCHO, CARLOS
STREET ADDRESS	400 KINGS POINT DR 724
CITY-ST-ZIP	N MIAMI BEACH, FL
TITLE	ST
NAME	CRISTANCHO, LUZ M.
STREET ADDRESS	400 KINGS POINT DR, 724
CITY-ST-ZIP	N MIAMI BEACH, FL
TITLE	D
NAME	CRISTANCHO SEGAL, LUZ CAROLINA
STREET ADDRESS	68-055 AKULA ST., #402
CITY-ST-ZIP	WAIALUA, HI 96791
TITLE	D
NAME	CRISTANCHO, KARINA
STREET ADDRESS	400 KINGS POINT DR. #724
CITY-ST-ZIP	NORTH MIAMI BEACH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Luiz G. Cristancho* 4/30/08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #