


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2008 08:00 AM
Secretary of State

DOCUMENT # P02000085418

1. Entity Name
C. R. BEST SERVICES INC.



Principal Place of Business
10500 SW 108 AVE #B116
MIAMI, FL 33176

Mailing Address
10500 SW 108 AVE #B116
MIAMI, FL 33176



03142008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
75-3079615

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

RODRIGUEZ, CARLOS
10500 S.W. 108 AVE.
APT. B-116
MIAMI, FL 33176

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**


UN00000878871
 04/14/08-80073-007 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RODRIGUEZ, CARLOS 10500 SW 108 AVE #B116 MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RODRIGUEZ, YAIBELYS 10500 SW 108 AVE #B116 MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DE DIEGO, BEATRIZ 10500 SW 108 AVE #B116 MIAMI, FL 33176
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 to this address, with all other like empowered.

SIGNATURE:  **3/14/08** **(305) 776-5426**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #