

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000052781

FILED
Apr 21, 2009
Secretary of State

Entity Name: BEST QUALITY CONSTRUCTION AND BUILDING SERVICES, INC.

Current Principal Place of Business:

3842 N. OLD DIXIE HWY.
BOYNTON BEACH, FL 33435

New Principal Place of Business:

3842 N. OLD DIXIE HWY.
DELRAY BEACH, FL 33483

Current Mailing Address:

3842 N. OLD DIXIE HWY.
BOYNTON BEACH, FL 33435

New Mailing Address:

3842 N. OLD DIXIE HWY.
DELRAY BEACH, FL 33483

FEI Number: 30-0489375

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, PATRICIA V.
252 E. BOCA RATON RD.
BOCA RATON, FL 33432 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: DP () Delete
Name: COHEN, PATRICIA V
Address: 1200 S. FEDERAL HWY, #202
City-St-Zip: BOYNTON BEACH, FL 33435

Title: DV () Delete
Name: CLAYTON, BRENT
Address: 1200 S FEDERAL HWY, #202
City-St-Zip: BOYNTON BEACH, FL 33435

Title: DST () Delete
Name: PAPTAEODOROU, ANDREAS
Address: 1200 S FEDERAL HWY, #202
City-St-Zip: BOYNTON BEACH, FL 33435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: PATRICIA V COHEN

P

04/21/2009

Electronic Signature of Signing Officer or Director

_____ Date