

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000019543

FILED  
Apr 24, 2007  
Secretary of State

Entity Name: GA BEST INSURANCE AND FINANCIAL SERVICES, INC.

**Current Principal Place of Business:**

2760 N. ORANGE BLOSSOM TRAIL  
STE 4  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

2760 N. ORANGE BLOSSOM TRAIL  
STE 4  
KISSIMMEE, FL 34744

**Current Mailing Address:**

4701 HURON BAY CIR  
KISSIMMEE, FL 34759

**New Mailing Address:**

536 BARCELONA DR.  
KISSIMMEE, FL 34759

FEI Number: 65-0825956

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GARZON, MARIO  
2760 N. ORANGE BLOSSOM TRAIL  
STE 4  
KISSIMMEE, FL 34741 US

**Name and Address of New Registered Agent:**

GARZON, MARIO  
2760 N. ORANGE BLOSSOM TRAIL  
STE 4  
KISSIMMEE, FL 34744 US

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: MARIO GARZON

04/24/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GARZON, MARIO  
Address: 4701 HURON BAY CIR  
City-St-Zip: KISSIMMEE, FL 34759

Title: VP ( ) Delete  
Name: GARZON, CLARA  
Address: 4701 HURON BAY CIR  
City-St-Zip: KISSIMMEE, FL 34759

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: GARZON, MARIO  
Address: 536 BARCELONA DR.  
City-St-Zip: KISSIMMEE, FL 34759

Title: VP (X) Change ( ) Addition  
Name: GARZON, CLARA  
Address: 536 BARCELONA DR.  
City-St-Zip: KISSIMMEE, FL 34759

I hereby certify that the information supplied with this filing does not qualify for the 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: MARIO GARZON

P

04/24/2007

Electronic Signature of Signing Officer or Director

Date