

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000006048

**Entity Name:** TRY YOUR BEST, INC.

**Current Principal Place of Business:**

16780 S.W. 62ND STREET  
SOUTHWEST RANCHES, FL 33331

**Current Mailing Address:**

16780 S.W. 62ND STREET  
SOUTHWEST RANCHES, FL 33331 US

**FEI Number:** 26-2990275

**Certificate of Status Desired:** No

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

LOWY, ALLEN  
16780 S.W. 62ND STREET  
SOUTHWEST RANCHES, FL 33331 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:** ALLEN LOWY

03/10/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name LOWY, ALLEN  
Address 16780 S.W. 62ND STREET  
City-State-Zip: SOUTHWEST RANCHES FL 33331

Title P  
Name LOWY, KIMBERLY  
Address 16780 S.W. 62ND STREET  
City-State-Zip: SOUTHWEST RANCHES FL 33331

Title TV  
Name NEWBANKS, MICHAEL  
Address 16820 SW 52 PLACE  
City-State-Zip: SOUTHWEST RANCHES FL 33331

Title SV  
Name NEWBANKS, LUANN  
Address 16820 SW 52 PLACE  
City-State-Zip: SOUTHWEST RANCHES FL 33331

Title V  
Name EXPOSITO, BROOKE  
Address 3301 NE 1ST AVE APT 2106  
City-State-Zip: MIAMI FL 33137

Title V  
Name LOWY, BRETT  
Address 7215 MIAMI LAKES DR A-18  
City-State-Zip: MIAMI LAKES FL 33014

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ALLEN LOWY

**DIRECTOR**

03/10/2022

Electronic Signature of Signing Officer/Director Detail

Date