

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000062736

**Entity Name:** BEST FINANCIAL SERVICES & ASSOCIATES, INC**Current Principal Place of Business:**8800 UNIVERSITY PARKWAY  
SUITE C-2  
PENSACOLA, FL 32514**Current Mailing Address:**8800 UNIVERSITY PARKWAY  
SUITE C-2  
PENSACOLA, FL 32514 US**FEI Number:** 20-1049290**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LUIS, RAMIREZ  
8800 UNIVERSITY PARKWAY  
SUITE C-2  
PENSACOLA, FL 32514 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

|                 |                                      |
|-----------------|--------------------------------------|
| Title           | PRESIDENT                            |
| Name            | RAMIREZ, LUIS                        |
| Address         | 8800 UNIVERSITY PARKWAY<br>SUITE C-2 |
| City-State-Zip: | PENSACOLA FL 32514                   |

|                 |                                      |
|-----------------|--------------------------------------|
| Title           | CEO                                  |
| Name            | RAMIREZ, LUIS                        |
| Address         | 8800 UNIVERSITY PARKWAY<br>SUITE C-2 |
| City-State-Zip: | PENSACOLA FL 32514                   |

|                 |                                      |
|-----------------|--------------------------------------|
| Title           | SECRETARY                            |
| Name            | RAMIREZ, LEHELLE                     |
| Address         | 8800 UNIVERSITY PARKWAY<br>SUITE C-2 |
| City-State-Zip: | PENSACOLA FL 32514                   |

|                 |                                      |
|-----------------|--------------------------------------|
| Title           | TREASURER                            |
| Name            | RAMIREZ, LUIS ADDRESS                |
| Address         | 8800 UNIVERSITY PARKWAY<br>SUITE C-2 |
| City-State-Zip: | PENSACOLA FL 32514                   |

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

**SIGNATURE:** LUIS RAMIREZ**PRESIDENT****02/22/2019**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date