

2020 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 SUITE C-2
City-State-Zip:	PENSACOLA FL 32514

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

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

Title	TREASURER
Name	RAMIREZ, LUIS ADDRESS
Address	8800 UNIVERSITY PARKWAY 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

02/24/2020

Electronic Signature of Signing Officer/Director Detail_____
Date