## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 293482** 

City-St-Zip:

DTS

Title:

Name:

Address:

City-St-Zip:

( ) Delete

FERNANDEZ, MARGUERITE P DTS

3832 PENINSULAR DRIVE

LAND O LAKES, FL 34639

**FILED** Apr 25, 2005 Secretary of State

Entity Name: BEST AUTO SALES INC **Current Principal Place of Business: New Principal Place of Business:** 6006 N. FLORIDA AVE. TAMPA, FL 33604 **Current Mailing Address: New Mailing Address:** 6006 N. FLORIDA AVE TAMPA, FL 33604 FEI Number: 59-1097565 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FERNANDEZ, EDWARD A PRES 6112 NORTH FLORIDA AVENUE TAMPA, FL 33604 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: (X) Change ( ) Addition ( ) Delete Title: FERNANDEZ, EDWARD A PD FERNANDEZ, EDWARD A PD Name: Name: 3832 PENINSULAR DRIVE 10238 CLEGHORN DRIVE Address: Address: City-St-Zip: LAND O LAKES, FL 34639 City-St-Zip: SAN ANTONIO, FL 33576 Title: Title: () Change () Addition () Delete Name: FERNANDEZ, MICHAEL E VD Name: 3431 VALLEY RANCH DRIVE Address: Address: LUTZ, FL 33549 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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

Title:

Name:

Address:

City-St-Zip:

DTS

(X) Change ( ) Addition

FERNANDEZ, MARGUERITE P DTS

10238 CLEGHORN DRIVE

SAN ANTONIO, FL 33576

SIGNATURE: EDWARD A FERNANDEZ **PRES** 04/25/2005

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.