

# 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 488147

Entity Name: BETTER SERVICE, INC.

FILED  
Sep 07, 2006  
Secretary of State

## Current Principal Place of Business:

2121 CORAL WAY  
MIAMI, FL 33145 US

## New Principal Place of Business:

2121 CORAL WAY  
CORAL GABLES, FL 33145 US

## Current Mailing Address:

438 GERONA AVE  
CORAL GABLES, FL 33146 US

## New Mailing Address:

2121 CORAL WAY  
CORAL GABLES, FL 33145 US

FEI Number: 59-1627758

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

AWUAPARA, OLGA  
438 GERONA AVENUE  
CORAL GABLES, FL 33146 US

## Name and Address of New Registered Agent:

MONTES, PEDRO F MR  
101 CRANDON BLVD  
# 367  
KEY BISCAVNE, FL 33149 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: PEDRO MONTES

09/07/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: AWUAPARA, OLGA A,  
Address: 438 GERONA AVE  
City-St-Zip: CORAL GABLES, FL 33146

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MONTES, PEDRO F  
Address: 101 CRANDON BLVD  
City-St-Zip: KEY BISCAVNE, FL 33149

Title: D ( ) Change (X) Addition  
Name: BORJAS, CLAUDIA  
Address: 101 CRANDON BLVD, # 367  
City-St-Zip: KEY BISCAVNE, FL 33149

Title: D ( ) Change (X) Addition  
Name: RODRIGUEZ, LUIS A  
Address: 816 NW 11ST, #504  
City-St-Zip: MIAMI, FL 33136

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: PEDRO MONTES

P

09/07/2006

Electronic Signature of Signing Officer or Director

Date