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FILED  
Feb 27, 1999 8:00 am  
Secretary of State

02-27-1999 90043 028 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 679847

1. Corporation Name

BEST RUBBER STAMP AND SEAL CORPORATION



Principal Place of Business

1695 W. 39TH PLACE UNIT B  
HIALEAH FL 33012  
US

Mailing Address

1695 W 39 PLACE  
B  
HIALEAH FL 33012  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/25/1980

4. FEI Number

59-2036749

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

NEGRIN CARLOS  
6180 W. 22 LANE  
HIALEAH FL 33016

10. Name and Address of New Registered Agent

81 Name CARLOS J. NEGRIN

82 Street Address (P.O. Box Number is Not Acceptable)

5800 SW 164 TERR

83

84 City FT. LAUDERDALE

FL

85 Zip Code

33331

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*Carlos J. Negrin*  
Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE TO ☒ DELETE

NAME NEGRIN, ELENA  
STREET ADDRESS 6180 W. 22 LANE  
CITY-ST-ZIP HIALEAH, FL 0

TITLE PD ☒ DELETE

NAME NEGRIN, CARLOS  
STREET ADDRESS 6180 W. 22 LANE  
CITY-ST-ZIP HIALEAH, FL 0

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE S/D

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE PD

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

ALICE M. NEGRIN ☐ Change ☒ Addition

5800 SW 164 TERR.  
FT. LAUDERDALE, FL 33331

CARLOS J. NEGRIN ☐ Change ☒ Addition

5800 SW 164 TERR.  
FT. LAUDERDALE, FL 33331

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Carlos J. Negrin* SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/06/99 (205) 558-6670

CR2E034 (11/98)