2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

F98000001665

1. Entity Name BEST VENDORS CO.



FILED Apr 01, 2003 8:00 am Secretary of State 04-01-2003 90042 018 ***150.00

Suite, Apt. 4. etc. City & State City & State Desired & Status Desired & Status Desired & State Desired	Principal Place of Business 2626 WEST LAKE STREET MINNEAPOLIS MN 55416		Mailing Address 2626 WEST LAKE STREET MINNEAPOLIS MN 55416			<i>></i>					
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Zip Country Zip Country S. Certificate of Status Desired Status De	Suite, Apt.	#, etc.	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES					
5. Cortinate A Status Desired Fee Required Fee	City & State		City & State			4. FEI Number 41-1356424					
Name CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City FL Zip Code	Zip	Country	Zip	Country		5. Certificate of S	tatus Desired [
Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Colly FL Zip Code Colly FL Zip Code 1. The above named entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familian with, and accept the obligations of registered agent and its if applicable. SISTNATURE TILE NOW!! FEE IS 150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State O. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TILE MAKE WILLIAM E POD WISSMAN, WILLIAM E WISSM, WILLIAM E WISSMAN, WIL		6. Name and Address of Current			-7. Name and Add	iress of New Regis	tered Ag	ent			
Street Address (P.O. Box Number is Not Acceptable)					Name						
PLANTATION FL 33324 City FL Zip Code			Street Addre			is (P.O. Box Number is Not Acceptable)					
City FL Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SISNATURE Title NOW!!! FEE IS \$150.00			<u> </u>					_			
B. The above named entity submits this statement for the purpose of changing its registered agent. or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SISNATURE Sprittin, their discrete agent. SISNATURE Sprittin, their discrete agent. FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IT IL TITLE NAME WISSMAN, WILLIAM E 2628 W LAKE STREET GITY-ST-2P MINNEAPOUS MN Delete WILSON, MARK STREET ADDRESS GITY-ST-2P MINNEAPOUS MN 55416 Delete TITLE NAME STREET ADDRESS GITY-ST-2P MINNEAPOUS MN 55416 Delete TITLE NAME STREET ADDRESS GITY-ST-2P TITLE Change Addition NAME STREET ADDRESS GITY-ST-2P TITLE Change Addition NAME STREET ADDRESS GITY-ST-2P TITLE TITLE CHANGES GITY-ST-2P TITLE TITLE CHANGES GITY-ST-2P TITLE TITLE CHANGES GITY-ST-2P TITLE T	PLANTATI	JN FL 33324							_		
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indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with a part of the receiver of trustee empowered.

SIGNATURE