

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 04, 2004 8:00 am
Secretary of State

06-04-2004 90004 022 ***150.00

DOCUMENT # K43759

1. Entity Name
BEST BUSINESS & TAX, INC.



Principal Place of Business

~~2016 N.E. 104 ST.~~
1282 N.E. 163 ST.
NO. MIAMI BEACH, FL 33162

Mailing Address

~~2016 N.E. 104 ST.~~
1282 N.E. 163 ST.
NO. MIAMI BEACH, FL 33162

163 ST.

54056779



03152003 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0081584

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RAUF, MICHAEL A
~~2016 N.E. 104 ST.~~ **1282 N.E. 163 ST.**
NORTH MIAMI BEACH, FL 33162

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	RAUF, MICHAEL A
STREET ADDRESS	1282 N.E. 163 ST
CITY-ST-ZIP	NO. MIAMI BCH, FL 33162
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 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 an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/30/04 (305) 944-3873

Attachment

54056779

State of Florida



Department of State

I certify that the attached is a true and correct copy of the Articles of Incorporation of BEST BUSINESS & TAX, INC., a corporation organized under the Laws of the State of Florida, filed on November 7, 1988, as shown by the records of this office.

The document number of this corporation is K43759.

Given under my hand and the
Great Seal of the State of Florida,
at Tallahassee, the Capital, this the
7th day of November, 1988.



Jim Smith

Jim Smith
Secretary of State