2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M47030

Entity Name: BEST JANITORIAL & SUPPLIES, INC.

FILED Apr 08, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3290 NW 29TH ST. MIAMI, FL 33142 US

Current Mailing Address: New Mailing Address:

3290 NW 29TH ST. MIAMI, FL 33142 US

FEI Number: 59-2769491 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DIAZ, PEDRO M. 3290 NW 29 STREET MIAMI, FL 33142 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 SPD () Delete
 Title:
 SPD (X) Change () Addition

 Name:
 DIAZ, PEDRO M.,
 Name:
 DIAZ, PEDRO M

 Address:
 7933 WEST DR., APT. 921
 Address:
 7933 WEST DR., APT. 921

City-St-Zip: N BAY VILLAGE, FL City-St-Zip: N BAY VILLAGE, FL 33141 US

Title: V () Delete Title: V (X) Change () Addition Name: GARCIGA, ANGEL. Name: HOLLOWAY, CARMELA

 Name:
 GARCIGA, ANGEL,
 Name:
 HOLLOWAY, CARMELA

 Address:
 8005 N.W. 8TH ST. 402
 Address:
 8635 N.W. 8TH ST. 406

 City-St-Zip:
 MIAMI, FL
 City-St-Zip:
 MIAMI, FL 33126 US

Title: VTD () Delete Title: VTD (X) Change () Addition

 Name:
 DIAZ, MARIA L
 Name:
 DIAZ, MARIA L

 Address:
 2160 SW 104 PLACE
 Address:
 2160 SW 104 PLACE

 City-St-Zip:
 MIAMI, FL 33165
 City-St-Zip:
 MIAMI, FL 33165 US

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 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 M. DIAZ SPD 04/08/2004