

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 30, 2001 8:00 am**  
**Secretary of State**

01-30-2001 90148 034 \*\*\*158.75

0232963

**DOCUMENT # P0000026129**

1. Entity Name

**AMERICAN BEST INVESTMENT CORP.**

Principal Place of Business

13800 S.W. 8TH STREET  
 #200  
 MIAMI FL 33184

Mailing Address

13800 S.W. 8TH STREET  
 #200  
 MIAMI FL 33184

2. Principal Place of Business

24822 SW 177th Ave.

Suite, Apt. #, etc.

3. Mailing Address

13727 SW 152 Street

Suite, Apt. #, etc.

# 243

City & State

MIAMI, Florida

City & State

MIAMI, Florida

4. FEI Number

65-0990698

Applied For

Not Applicable

Zip

33031

Country

USA

Zip

33177

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ARGUELLO, DIONNE M  
 13800 S.W. 8TH STREET  
 #200  
 MIAMI FL 33184

7. Name and Address of New Registered Agent

Name

Enrique J. Arguello

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

13727 SW 152 St #243

City

Miami

FL

Zip Code

33177

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.

SIGNATURE

*Enrique J. Arguello*

ENRIQUE J. ARGUELLO

PRESIDENT

1/21/01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	ARGUELLO, ENRIQUE J	
STREET ADDRESS	13800 S.W. 8TH STREET	
CITY-ST-ZIP	MIAMI FL 33184	
TITLE	D	<input type="checkbox"/> Delete
NAME	ARGUELLO, DIONNE M	
STREET ADDRESS	13800 S.W. 8TH STREET	
CITY-ST-ZIP	MIAMI FL 33184	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P/S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ENRIQUE J. ARGUELLO	
STREET ADDRESS	13727 SW 152 St #243	
CITY-ST-ZIP	MIAMI, FL 33177	
TITLE	V/T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIONNE M. ARGUELLO	
STREET ADDRESS	13727 SW 152 St #243	
CITY-ST-ZIP	MIAMI, FL 33177	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Enrique J. Arguello*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-20-01

Date

305-283.2103

Daytime Phone #

CR2E034 (10/00)