Apr 24 03 01:31p Jonathan Shatz 9

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91889 035 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000093203

1. Entity Name
BEST MARINE IMPORTS, INC.

110400J10

Principal Place of Business
~~1985 S OCEAN DR~~
~~HALLANDALE FL 33009~~

Mailing Address
~~1740 E HALLANDALE BEACH~~
~~#230~~
~~HALLANDALE FL 33009~~

2. Principal Place of Business: 2801 SW 3rd Ave
Suite, Apt. #, etc.: F14
City & State: Ft. Lauderdale FL
Zip: 33315 Country: USA

3. Mailing Address: 2801 SW 3rd Ave
Suite, Apt. #, etc.: F14
City & State: Ft. Lauderdale FL
Zip: 33315 Country: USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-1046056 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ISAACOVICI, CAROLYN
1985 S OCEAN DR
HALLANDALE FL 33009

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable) 2801 SW 3rd Ave
F 14
City Ft. Lauderdale FL Zip Code 33315

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 X Carolyn Isacovici VP. 4/30/03
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
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP / ISACOVICI, CAROLYN / ~~1985 S OCEAN DR~~ / ~~HALLANDALE FL 33009~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition / 2801 SW 3rd Ave F14 / Ft. Lauderdale FL 33315
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P / ISACOVICI, ROBERTO / ~~1985 S OCEAN DR~~ / ~~HALLANDALE FL 33009~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition / 2801 SW 3rd Ave / Ft. Lauderdale FL 33315
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: X Roberto Isacovici 04-30-03 954-456-1619
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ROBERT ISACOVICI