

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000100883

FILED
Apr 04, 2005
Secretary of State

Entity Name: BEST PROPERTIES, INCORPORATED

Current Principal Place of Business:

4440 NW 65 STREET
COCONUT CREEK, FL 33073

New Principal Place of Business:

1800 S. OCEAN BLVD.
#607
POMPANO BEACH, FL 33062

Current Mailing Address:

4440 NW 65 STREET
COCONUT CREEK, FL 33073

New Mailing Address:

P.O. BOX 11262
POMPANO BEACH, FL 33061

FEI Number: 65-1061780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHARF, DENISE C
4440 NW 65 STREET
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

SHARF, DENISE C
P.O. BOX 11262
POMPANO BEACH, FL 33061 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:

04/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: SHARF, DENISE C
Address: 4440 NW 65 STREET
City-St-Zip: COCONUT CREEK, FL 33073

Title: VPT () Delete
Name: BESTENI, ALBA MARIE
Address: 4440 NW 65 STREET
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: SHARF, DENISE C
Address: 1800 S. OCEAN BLVD., #607
City-St-Zip: POMPANO BEACH, FL 33062

Title: VPT (X) Change () Addition
Name: BESTENI, ALBA-MARIE
Address: 1800 S. OCEAN BLVD., #607
City-St-Zip: POMPANO BEACH, FL 33062

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: ALBA-MARIE BESTENI

VP

04/04/2005

Electronic Signature of Signing Officer or Director

Date