2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2009
Secretary of State

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Entity Name: AMERICAN BEST SOLUTIONS CORP.

Current Principal Place of Business:

24822 SW 177TH AV
MIAMI, FL 33031

New Principal Place of Business:

5600 SW 135 AV # 213
MIAMI, FL 33183

Current Mailing Address:

PO BOX #771076
MIAMI, FL 33177

New Mailing Address:

FEI Number: 65-1083776 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MIRANDA A., DIONNE M
18408 SW 132 CT.
MIAMI, FL 33177 US

Name and Address of New Registered Agent:

ARGÜELLO., DIONNE M
18408 SW 132 PL.
MIAMI, FL 33177 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: DIONNE M. ARGÜELLO 01/05/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MIRANDA A., DIONNE M
Address: POBOX # 771076
City-St-Zip: MIAMI, FL 33177

Title: VTD ( ) Delete
Name: ARGUELLO, ENRIQUE J
Address: POBOX # 771076
City-St-Zip: MIAMI, FL 33177

Title: PDTE (X) Delete
Name: ARGUELLO, FRANCISCO J
Address: POBOX # 771076
City-St-Zip: MIAMI, FL 33177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: ARGÜELLO., DIONNE M
Address: POBOX # 771076
City-St-Zip: MIAMI, FL 33177

Title: D (X) Change ( ) Addition
Name: ARGÜELLO, ENRIQUE J
Address: POBOX # 771076
City-St-Zip: MIAMI, FL 33177

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DIONNE M. ARGÜELLO D 01/05/2009
Electronic Signature of Signing Officer or Director Date