

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000016024

FILED
Mar 22, 2004
Secretary of State

Entity Name: BEST WAY IMPORT-EXPORT CORP.

Current Principal Place of Business:

20820 SAN SIMEON WAY
SUITE 25
MIAMI, FL 33179

New Principal Place of Business:

3800 HILLCREAST DRIVE
1022
HOLLYWOOD, FL 33021

Current Mailing Address:

20820 SAN SIMEON WAY
SUITE 25
MIAMI, FL 33179

New Mailing Address:

3800 HILLCREAST DRIVE
1022
HOLLYWOOD, FL 33021

FEI Number: 61-1411643

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAROCHAR, LILIAN
20820 SAN SIMEON WAY
#25
MIAMI, FL 33179

Name and Address of New Registered Agent:

SAROCHAR, LILIAN
3800 HILLCREAST DRIVE
1022
HOLLYWOOD, FL 33021

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:

03/22/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SAROCHAR, LILIANA
Address: 20820 SAN SIMEON WAY #25
City-St-Zip: MIAMI, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SAROCHAR, LILIANA
Address: 3800 HILLCREAST DRIVE SUITE 1022
City-St-Zip: HOLLYWOOD, FL 33021

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: LILIANA SAROCHAR

PD

03/22/2004

Electronic Signature of Signing Officer or Director

Date