

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000031695

Entity Name: BEST MORTGAGE LOAN, INC.

FILED
Jan 04, 2007
Secretary of State

Current Principal Place of Business:

7035 PHILIPS HIGH WAY
9
JACKSONVILLE, FL 32216 US

Current Mailing Address:

P.O. BOX 550910
JACKSONVILLE, FL 32255 US

New Principal Place of Business:

5569 BOWDEN ROAD
4
JACKSONVILLE, FL 32216 US

New Mailing Address:

FEI Number: 59-3665077 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAMEZ, CARLOS
6700 BOWDEN RD #1001
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

GAMEZ, CARLOS M
6700 BOWDEN RD #1001
JACKSONVILLE, FL 32216 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: CARLOS M GAMEZ

01/04/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GAMEZ, CARLOS M
Address: 6700 BOWDEN RD #1001
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CARLOS M GAMEZ

PD

01/04/2007

Electronic Signature of Signing Officer or Director

Date