

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000047327

FILED
Apr 19, 2005
Secretary of State

Entity Name: BEST CARE TRANSPORTATION, INC.

Current Principal Place of Business:

7221 CORAL WAY, #204
MIAMI, FL 33155

New Principal Place of Business:

7221 CORAL WAY
SUITE #204
MIAMI, FL 33155

Current Mailing Address:

8348 S.W. 40TH ST.
MIAMI, FL 33155

New Mailing Address:

7221 CORAL WAY
SUITE #204
MIAMI, FL 33155

FEI Number: 37-1428554

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NOVOA, JORGE T
8348 S.W. 40TH ST.
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

NOVOA, JORGE T
7221 CORAL WAY
SUITE #204
MIAMI, FL 33155 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:

04/19/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NOVOA, JORGE T
Address: 8348 S.W. 40TH ST.
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NOVOA, JORGE T
Address: 7221 CORAL WAY SUITE # 204
City-St-Zip: MIAMI, FL 33155

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: JORGE T NOVOA

PD

04/19/2005

Electronic Signature of Signing Officer or Director

Date