2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000058227

Entity Name: BEST BUILDERS OF MIAMI CORP.

FILED Jan 06, 2006 Secretary of State

8139 SW 208 TER PO BOX 972923 MIAMI, FL 33189 PO BOX 972923 MIAMI, FL 33197

Current Mailing Address: New Mailing Address:

8139 SW 208 TER PO BOX 972923 MIAMI, FL 33189 PO BOX 973923 MIAMI, FL 33197

FEI Number: 48-1260298 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 ECHAVARRIA, JOSE J
 ECHAVARRIA, JOSE J

 8139 SW 208 TER
 8130 SW 209 TERRACE

 MIAMI, FL 33189 US
 MIAMI, FL 33197 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: 01/06/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Name:

Address: City-St-Zip: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition
Name: ECHAVARRIA, JOSE Name: ECHAVARRIA, JOSE
Address: 8139 SW 208 TER 8130 SW 209TER

 Address:
 8139 SW 208 TER
 Address:
 8130 SW 209TER

 City-St-Zip:
 MIAMI, FL 33189
 City-St-Zip:
 MIAMI, FL 33189

Title: VPD () Delete Title: VPD (X) Change () Addition

 Name:
 VAIDES, ALIBECH
 Name:
 VAIDES, ALIBECH

 Address:
 8139 SW 208 TER
 Address:
 8130 SW 209 TER

 City-St-Zip:
 MIAMI, FL 33189
 City-St-Zip:
 MIAMI, FL 33189

Title: VPD (X) Delete Title: () Change () Addition

ECHAVARRIA, JUSTIN B Name: 6451 SW 2ND ST Address: MIAMI, FL 33144 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: JOSE J. ECHAVARRIA PD 01/06/2006