

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000073587

FILED
May 06, 2004
Secretary of State

Entity Name: BESTPLY WOOD PRODUCTS CORP.

Current Principal Place of Business:

3101 NW 25TH AVENUE
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

3101 NW 25TH AVENUE
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 02-0627668

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
3929 N FEDERAL HWY
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE RD
POMPANO BEACH, FL 33064 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: TAX HOUSE CORPORATION

05/06/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARTINS, ABILIO
Address: 3101 NW 25TH AVE
City-St-Zip: POMPANO BEACH, FL 33069

Title: PT () Delete
Name: LIMA, CLAUDIA R
Address: 3101 NW 25 AVE
City-St-Zip: POMPANO BEACH, FL 33069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MARTINS, ABILIO J
Address: 3101 NW 25TH AVE
City-St-Zip: POMPANO BEACH, FL 33069

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 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: ABILIO J MARTINS

P

05/06/2004

Electronic Signature of Signing Officer or Director

Date