

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000076224

Entity Name: BEST WAY CORP.

FILED
Apr 02, 2006
Secretary of State

Current Principal Place of Business:

12530 EQUESTRIAN CIRCLE #416
FORT MYERS, FL 33907

New Principal Place of Business:

12530 EQUESTRIAN CIRCLE
416
FORT MYERS, FL 33907

Current Mailing Address:

12530 EQUESTRIAN CIRCLE #416
FORT MYERS, FL 33907

New Mailing Address:

12530 EQUESTRIAN CIRCLE
416
FORT MYERS, FL 33907

FEI Number: 74-3051961

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 HIGHWAY
POMPAHO BEACH, FL 33064 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GAGEIRO, JUNIO M
Address: 12530 EQUESTRIAN CIRCLE #416
City-St-Zip: FORT MYERS, FL 33901

Title: VD () Delete
Name: SIMONI, JEFFREY
Address: 12640 EQUESTRIAN CIRCLE #1916
City-St-Zip: FORT MYERS, FL 33907

Title: STD () Delete
Name: SIMONI, MELISSA
Address: 12530 EQUESTRIAN CIRCLE #416
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JUNIOGAGEIRO

PD

04/02/2006

Electronic Signature of Signing Officer or Director

Date