

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000084299

FILED
Apr 03, 2007
Secretary of State

Entity Name: BEST CARLTON ,INC

Current Principal Place of Business:

226 BAY MEADOW DRIVE
KISSIMMEE, FL 34746 US

New Principal Place of Business:

4651 W. IRLO BRONSON MEMORIAL HWY
KISSIMMEE, FL 34746 US

Current Mailing Address:

226 BAY MEADOW DRIVE
KISSIMMEE, FL 34746 US

New Mailing Address:

4651 W. IRLO BRONSON HWY
KISSIMMEE, FL 34746 US

FEI Number: 30-0153891

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATEL, JITENDRAKUMAR P MR
4651 W IRLD BRONSON MEMORIAL HWY
KISSIMMEE, FL 34746 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: P () Delete
Name: PATEL, JITENDRAKUMAR P MR
Address: 226 BAY MEADOW DRIVE
City-St-Zip: KISSIMMEE, FL 34746 US

Title: VP () Delete
Name: PATEL, PRAVINA J MRS
Address: 226 BAY MEADOW DRIVE
City-St-Zip: KISSIMMEE, FL 34746 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PATEL, JITENDRAKUMAR P MR
Address: 4651 W. IRLO BRONSON MEMORIAL HWY
City-St-Zip: KISSIMMEE, FL 34746 US

Title: VP (X) Change () Addition
Name: PATEL, PRAVINA J MRS
Address: 4651 W IRLO BRONSON MEMORIAL HWY
City-St-Zip: KISSIMMEE, FL 34746 US

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: JITENDRAKUMAR PATEL

P

04/03/2007

Electronic Signature of Signing Officer or Director

_____ Date