2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# P03000015225

Entity Name: THE BEST FRIENDS SERVICES INC.

Current Principal Place of Business:

5221 NE 19TH AVENUE
POMPANO BEACH, FL 33064

New Principal Place of Business:

1313 S MILITARY TRAIL
265
DEERFIELD BEACH, FL 33442

Current Mailing Address:

5221 NE 19TH AVENUE
POMPANO BEACH, FL 33064

New Mailing Address:

1313 S MILITARY TRAIL
265
DEERFIELD BEACH, FL 33442

FEI Number: 81-0595420 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE ROAD
POMPANO 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: MACHADO, WILLIAM P
Address: 5221 NE 19TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33064

Title: VPD ( ) Delete
Name: ROCHA, LUZIA J
Address: 5221 NE 19TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MACHADO, WILLIAM P
Address: 1313 S MILITARY TRAIL #265
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: VPD (X) Change ( ) Addition
Name: ROCHA, LUZIA J
Address: 1313 S MILITARY TRAIL #265
City-St-Zip: DEERFIELD BEACH, FL 33442

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: WILLIAM P MACHADO PD 04/27/2006

Electronic Signature of Signing Officer or Director Date