

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000075293

FILED
Jun 26, 2009
Secretary of State**Entity Name:** BEST WAY SERVICES CORP.**Current Principal Place of Business:**6078 NW 22ND. AV
BOCA RATON, FL 33496**New Principal Place of Business:**6558 SW 20TH CT
PLANTATION, FL 33317 US**Current Mailing Address:**6078 NW 22ND. AV
BOCA RATON, FL 33496**New Mailing Address:**18331 PINES BLVD
226
PEMBROKE PINES, FL 33029 US**FEI Number:** 35-2168646**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DE DENGHY, MARITZA
6078 NW 22ND. AV
BOCA RATON, FL 33496 US**Name and Address of New Registered Agent:**SUERO, LUCILLA
6558 SW 20TH CT
PLANTATION, FL 33317 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: LUCILLA SUERO

06/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DE DENGHY, MARITZA
Address: 6078 NW 22ND. AV
City-St-Zip: BOCA RATON, FL 33496

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SANCHEZ, GILDARDO
Address: 18331 PINES BLVD #226
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: S () Change (X) Addition
Name: SUERO, LUCILLA
Address: 6558 SW 20TH CT
City-St-Zip: PLANTATION, FL 33317 US

Title: T () Change (X) Addition
Name: SUERO, LUCILLA
Address: 6558 SW 20TH CT.
City-St-Zip: PLANTATION, FL 33317 US

I hereby certify that the information supplied with this filing does not qualify 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: LUCILLA SUERO

T

06/26/2009

Electronic Signature of Signing Officer or Director

Date