

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000112504

FILED
Jan 29, 2004
Secretary of State

Entity Name: BEST INSURANCE OF FLORIDA USA, INC.

Current Principal Place of Business:

3126 GANDY BLVD.
B
TAMPA, FL 33611 US

New Principal Place of Business:

Current Mailing Address:

1718 E. 7TH AVE
201
TAMPA, FL 33605

New Mailing Address:

FEI Number: 20-0292265 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODY, JAMAAL L
1718 E. 7TH AVE
201
TAMPA, FL 33605 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: CARTER, PATRICIA,
Address: 3126 GANDY BLVD. SUITE B
City-St-Zip: TAMPA, FL 33611

Title: VP () Delete
Name: WHITE, SEAN
Address: 3126 GANDY BLVD. SUITE B
City-St-Zip: TAMPA, FL 33611

Title: S () Delete
Name: CARTER, PATRICIA
Address: 3126 GANDY BLVD. SUITE B
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: GENTLE, LOUISE
Address: 3126 GANDY BLVD. SUITE B
City-St-Zip: TAMPA, FL 33611

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: SEAN WHITE

VP

01/29/2004

Electronic Signature of Signing Officer or Director

_____ Date