# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Aug 02, 2007**
**Secretary of State**

DOCUMENT# P03000143829

**Entity Name:** BEST CHOICE GENERAL SERVICES INC.

**Current Principal Place of Business:**

8380 W. STATE RD. 84
DAVIE, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

8380 W. STATE RD. 84
DAVIE, FL 33324

**New Mailing Address:**

12683 SW 8 CT
DAVIE, FL 33325

**FEI Number: 26-0075991** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LAPA, KARINA
8380 W. STATE RD. 84
DAVIE, FL 33324 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

**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**
**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PVD ( ) Delete
Name: LAPA, KARINA
Address: 8380 W. STATE RD. 84
City-St-Zip: DAVIE, FL 33324

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: PVD ( ) Change (X) Addition
Name: LAPA, PAULO F
Address: 12683 SW 8 CT
City-St-Zip: DAVIE, FL 33325

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: KARINA LAPA PVD 08/02/2007

Electronic Signature of Signing Officer or Director Date