

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000026387

**FILED**  
**Feb 04, 2011**  
**Secretary of State**

**Entity Name:** BEST SELLERS PUBLISHERS, INC.

**Current Principal Place of Business:**

19620 PINES BLVD  
STE 220  
PEMBROKE PINES, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 820814  
SOUTH FLORIDA, FL 33082

**New Mailing Address:**

**FEI Number:** 20-4893739

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ORTIZ, LEMUEL A  
3771 SW 160 TH AVE  
SUITE 204  
MIRAMAR, FL 33027 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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** ORTIZ, EDWIN L  
**Address:** 19620 PINES BLVD #220  
**City-St-Zip:** PEMBROKE PINES, FL 33029

**Title:** V  
**Name:** ARROYO-PANTOJA, MARIA DEL C  
**Address:** 4887 SW 183RD AVE  
**City-St-Zip:** MIRAMAR, FL 33029

**Title:** T  
**Name:** ORTIZ, GAMALIEL  
**Address:** 2955 NW 126 AVE, #418  
**City-St-Zip:** SUNRISE, FL 33323

I hereby 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 all other like empowered.

**SIGNATURE:** LEMUEL ORTIZ

RA

02/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date