

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000071934

FILED
Oct 22, 2008
Secretary of State**Entity Name:** BEST BEACH PROPERTIES, INC.**Current Principal Place of Business:**7145 COLLINS AVE.
MIAMI BEACH, FL 33141**New Principal Place of Business:**3933 BISCAYNE BLVD
MIAMI, FL 33137**Current Mailing Address:**7145 COLLINS AVE.
MIAMI BEACH, FL 33141**New Mailing Address:**3933 BISCAYNE BLVD.
MIAMI, FL 33137**FEI Number:** 20-1085967**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CHEHEBAR, ABRAHAM
7145 COLLINS AVE.
MIAMI BEACH, FL 33141 US**Name and Address of New Registered Agent:**CHEHEBAR, ABRAHAM
3933 BISCAYNE BLVD
MIAMI, FL 33137 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:_____
Electronic Signature of Registered Agent

10/22/2008

Date**OFFICERS AND DIRECTORS:****Title:** MGRM () Delete
Name: CHEHEBAR, ABRAHAM
Address: 7145 COLLINS AVE.
City-St-Zip: MIAMI, FL 33141**Title:** OFFI (X) Delete
Name: CHERQUI, DOMINIQUE S
Address: 7145 COLLINS AVE.
City-St-Zip: MIAMI BEACH, FL 33141**Title:** OFFI (X) Delete
Name: ARELLANO, GINA O
Address: 7145 COLLINS AVE.
City-St-Zip: MIAMI BEACH, FL 33141**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** MGRM (X) Change () Addition
Name: CHEHEBAR, ABRAHAM
Address: 3933 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33137**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: ABRAHAM CHEHEBAR_____
Electronic Signature of Signing Officer or Director

MGRM

10/22/2008

Date