

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000074998

FILED
Nov 30, 2005
Secretary of State

Entity Name: BEST IRRIGATION & LANDSCAPING SERVICES INC.

Current Principal Place of Business:

10760 CLEARLAKE LOOP
319
FORT MYERS, FL 33908

New Principal Place of Business:

3617 1ST STREET SW
LEHIGH ACRES, FL 33971

Current Mailing Address:

10760 CLEARLAKE LOOP
319
FORT MYERS, FL 33908

New Mailing Address:

3617 1ST STREET SW
LEHIGH ACRES, FL 33971

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NARVAEZ, LUIS F
10760 CLEARLAKE LOOP
319
FORT MYERS, FL, FL 33908 US

Name and Address of New Registered Agent:

NARVAEZ, LUIS F
3617 1ST STREET SW
LEHIGH ACRES, FL 33971 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: LUIS F. NARVAEZ

11/30/2005

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: P () Delete
Name: NARVAEZ, LUIS F
Address: 10760 CLEARLAKE LOOP #319
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NARVAEZ, LUIS F
Address: 3617 1ST STREET SW
City-St-Zip: LEHIGH ACRES, FL 33971

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: LUIS F. NARVAEZ

P

11/30/2005

Electronic Signature of Signing Officer or Director

Date