

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000099984

Entity Name: BEST I.C.E., INC.

FILED
Mar 12, 2007
Secretary of State

Current Principal Place of Business:

24795 NE 147TH PL
SALT SPRINGS, FL 32134

New Principal Place of Business:

Current Mailing Address:

24795 NE 147TH PL
SALT SPRINGS, FL 32134

New Mailing Address:

FEI Number: 20-1328164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEFFERT, CHRIS
24795 NE 147TH PL
SALT SPRINGS, FL 32134 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: PD () Delete
Name: MEFFERT, JOYCE
Address: 24795 NE 147TH PLACE
City-St-Zip: SALT SPRINGS, FL 32134

Title: VD () Delete
Name: MEFFERT, CHRIS
Address: 24795 NE 147TH PLACE
City-St-Zip: SALT SPRINGS, FL 32134

Title: STD () Delete
Name: RAY, JAMES
Address: 3664 NE 67TH TERRACE
City-St-Zip: SILVER SPRINGS, FL 34488

Title: D () Delete
Name: BIRDSALL, SHAN
Address: 21530 NE 151ST PLACE
City-St-Zip: SALT SPRINGS, FL 32134

Title: D () Delete
Name: HARROP, GRAYSON
Address: BOX 5391
City-St-Zip: SALT SPRINGS, FL 32134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: JOYCE MEFFERT

PD

03/12/2007

Electronic Signature of Signing Officer or Director

Date