

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

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05 APR 14 PM 2:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name
THE BEST FAMILY INVESTMENT GROUP, INC.

Principal Place of Business
1862 NW 145TH TERRACE
PEMBROKE PINES, FL 33028

Mailing Address
1862 NW 145TH TERRACE
PEMBROKE PINES, FL 33028

2. Principal Place of Business
10676 Old Hammock Way

3. Mailing Address
10676 Old Hammock Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Wellington, Florida

City & State
Wellington, Florida

Zip Country
33414 USA

Zip Country
33414 USA

04062005 Chg-P CR2E034 (10/03)

4. FEI Number
20-1711592

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GONZALEZ, MICHAEL
1862 NW 145TH TERRACE
PEMBROKE PINES, FL 33028

7. Name and Address of New Registered Agent

Name
Jose A. Gonzalez
Street Address (P.O. Box Number is Not Acceptable)
10676 Old Hammock Way

City, State, Zip Code
Wellington, FL 33414

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME GONZALEZ, MICHAEL
STREET ADDRESS 1862 NW 145TH TERRACE
CITY- ST- ZIP PEMBROKE PINES, FL 33028

TITLE T ☐ Delete
NAME VACCA, ANTONIO J
STREET ADDRESS 8988 NW 187TH STREET
CITY- ST- ZIP MIAMI, FL 33018

TITLE S ☐ Delete
NAME GUARIN, FRANCISCO
STREET ADDRESS 1273 SW 116 WAY
CITY- ST- ZIP DAVIE, FL 33325

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition
NAME Jose A. Gonzalez
STREET ADDRESS 10676 Old Hammock Way
CITY- ST- ZIP Wellington, FL 33414

TITLE T ☒ Change ☐ Addition
NAME Jorge Toro
STREET ADDRESS 11235 NW 43 Place
CITY- ST- ZIP Coral Springs, FL 33065

TITLE S ☒ Change ☐ Addition
NAME Marco A. Uribe
STREET ADDRESS 20849 Sailfish Lane
CITY- ST- ZIP Miami, FL 33189

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/6/05 954-873-3190