

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000151361

Entity Name: BEST WAY TELECOMM, CORP

FILED
Jun 10, 2007
Secretary of State

Current Principal Place of Business:

15689 SW 106 LN - # 708
MIAMI, FL 33196

New Principal Place of Business:

Current Mailing Address:

15689 SW 106 LN - # 708
MIAMI, FL 33196

New Mailing Address:

59 WATERSIDE DR.
D
WILDWOOD, MO 63040

FEI Number: 20-1899818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, ARNOLD
15689 SW 106 LN - # 708
MIAMI, FL 33196 US

Name and Address of New Registered Agent:

ROJAS, RENE
15689 SW 106 LN
708
MIAMI, FL 33196 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: RENE ROJAS

06/10/2007

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: PD () Delete
Name: PENTON MALDONADO, ROSA ANA
Address: 15689 SW 106 LN - # 708
City-St-Zip: MIAMI, FL 33196

Title: VPD () Delete
Name: SALAUES, RENE ROJAS
Address: 15689 SW 106 LN - # 708
City-St-Zip: MIAMI, FL 33196

Title: SD (X) Delete
Name: GARCIA, ARNOLD
Address: 15689 SW 106 LN - # 708
City-St-Zip: MIAMI, FL 33196

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:

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: ROSA ANA PENTON

PD

06/10/2007

Electronic Signature of Signing Officer or Director

Date