

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000154108

**FILED**  
**Apr 20, 2006**  
**Secretary of State**

**Entity Name:** BEST HOME MORTGAGE CORP.

**Current Principal Place of Business:**

14100 PALMETTO FRONTAGE RD.  
SUITE 110  
MIAMI LAKES, FL 33016

**New Principal Place of Business:**

8145 W 28 AVE  
SUITE 207  
HIALEAH, FL 33016

**Current Mailing Address:**

14100 PALMETTO FRONTAGE RD.  
SUITE 110  
MIAMI LAKES, FL 33016

**New Mailing Address:**

8145 W 28 AVE  
SUIT2070  
HIALEAH, FL 33016

**FEI Number:** 20-1891308

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ALVAREZ, OLGA MS.  
15234 NW 87 CT.  
MIAMI LAKES, FL 33018 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: CEO ( ) Delete  
Name: ALVAREZ, OLGA MS.  
Address: 15234 NW 87 CT  
City-St-Zip: MIAMI LAKES, FL 33018

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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:** OLGA ALVAREZ

CEO

04/20/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date