

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000128564

Entity Name: B.E.S.T. SPEECH THERAPY INC.

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

8461 LAKE WORTH RD
SUITE 199
LAKE WORTH, FL 33467 US

New Principal Place of Business:

Current Mailing Address:

8461 LAKE WORTH RD
SUITE 199
LAKE WORTH, FL 33467 US

New Mailing Address:

FEI Number: 75-3211351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENAVIDES, DIANE
8461 LAKE WORTH RD
SUITE 199
LAKE WORTH, FL 33467 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: P () Delete
Name: BENAVIDES, DIANE
Address: 8461 LAKE WORTH RD SUITE 199
City-St-Zip: LAKE WORTH, FL 33467 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/S (X) Change () Addition
Name: BENAVIDES, DIANE
Address: 8461 LAKE WORTH RD SUITE 199
City-St-Zip: LAKE WORTH, FL 33467 US

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: DIANE BENAVIDES

P/S

04/20/2009

Electronic Signature of Signing Officer or Director

Date