


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 23, 2007 08:00 AM
Secretary of State

DOCUMENT # P05750 1. Entity Name R.L. BEST INTERNATIONAL, INC.	
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Principal Place of Business 1775 EAST LAKE MARY BLVD SANFORD, FL 32773 US	Mailing Address 1775 E. LAKE MARY BLVD. SANFORD, FL 32773 US
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DO NOT WRITE IN THIS SPACE



02082007 No Chg-P CR2E034 (11/05)

4. FEI Number 34-1464887	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent BEST, TED A. 1775 EAST LAKE MARY BLVD SANFORD, FL 32773
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**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1000000645283 03/02/07-80079-002 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KAVANAUGH, WILLIAM 9931 CALLAWOODS DR. CANFIELD, OH 44406
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BEST, TED A. 1775 E. LAKE MARY BLVD. SANFORD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD BEST, MARK R. 8000 W MIDDLETOWN ROAD SALEM, OH 44460
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD BEST, RICHARD L 824 BEV ROAD YOUNGSTOWN, OH
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Mark R. Best **2-15-07** **330-758-8601**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #