

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000012740

Entity Name: BEST VALUE AUTO SALES, INC

FILED
Jan 04, 2008
Secretary of State

Current Principal Place of Business:

5608 N FLORIDA AVE
TAMPA, FL 33604

New Principal Place of Business:

Current Mailing Address:

5608 N FLORIDA AVE
TAMPA, FL 33604

New Mailing Address:

FEI Number: 20-4283331

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, NARCISO
8604 N FLORIDA AVE
TAMPA, FL 33604 US

Name and Address of New Registered Agent:

GARCIA, NARCISO
5608 N FLORIDA AVE
TAMPA, FL 33604 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: NARCISO GARCIA

01/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GARCIA, NARCISO
Address: 5608 N FLORIDA AVE
City-St-Zip: TAMPA, FL 33604

Title: VP () Delete
Name: RODRIGUEZ, CARLOS
Address: 5608 N FLORIDA AVE
City-St-Zip: TAMPA, FL 33604

Title: S () Delete
Name: GARCIA, ALBERTO
Address: 5608 N FLORIDA AVE
City-St-Zip: TAMPA, FL 33604

Title: T () Delete
Name: TORIBIO, AURA S
Address: 5608 N FLORIDA AVE
City-St-Zip: TAMPA, FL 33604

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:

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: ALBERTO GARCIA

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01/04/2008

Electronic Signature of Signing Officer or Director

Date