

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000064528

FILED
May 01, 2007
Secretary of State

Entity Name: BEST TRANSPORT SERVICE INC

Current Principal Place of Business:

9956 DEAN OAKS COURT
ORLANDO, FL 32825

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 526
GOLDENROD, FL 32733

New Mailing Address:

FEI Number: 20-4818076

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IRIZARRY, MANUEL A
9956 DEAN OAKS COURT
ORLANDO, FL 32825 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

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: P () Delete
Name: IRIZARRY, MANUEL A
Address: 9956 DEAN OAKS COURT
City-St-Zip: ORLANDO, FL 32825

Title: VP () Delete
Name: IRIZARRY, EVELYN
Address: 10761 FLYCAST CIRCLE
City-St-Zip: ORLANDO, FL 32825

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: IRIZARRY, MANUEL A
Address: 9956 DEAN OAKS COURT
City-St-Zip: ORLANDO, FL 32825 US

Title: VP (X) Change () Addition
Name: IRIZARRY, EVELYN
Address: 10761 FLYCAST CIRCLE
City-St-Zip: ORLANDO, FL 32825 US

Title: SEC () Change (X) Addition
Name: IRIZARRY, EVELYN
Address: 10761 FLYCAST CIRCLE
City-St-Zip: ORLANDO, FL 32825 US

Title: TREA () Change (X) Addition
Name: IRIZARRY, MANUEL A
Address: 9956 DEAN OAKS COURT
City-St-Zip: ORLANDO, FL 32825 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: MANUEL A IRIZARRY

P

05/01/2007

Electronic Signature of Signing Officer or Director

Date