

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000078312

FILED
Apr 28, 2009
Secretary of State

Entity Name: THE BEST SOLUTIONS BUSINESS & SERVICES CORP.

Current Principal Place of Business:

1135 97TH STREET
1
BAY HARBOR ISLANDS, FL 33154

New Principal Place of Business:

1001 91 ST.
511
BAY HARBOR ISLANDS, FL 33154

Current Mailing Address:

1135 97 STREET
1
BAY HARBOR ISLANDS, FL 33154

New Mailing Address:

1001 91 ST.
511
BAY HARBOR ISLANDS, FL 33154

FEI Number: 20-5556224

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVID, JAIME O
1135 97TH STREET
1
BAY HARBOR ISLANDS, FL 33154 US

Name and Address of New Registered Agent:

JIMENEZ, GABY
1001 91 ST.
511
BAY HARBOR ISLANDS, FL 33154 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: GABY JIMENEZ

04/28/2009

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: DAVID, JAIME
Address: 1135 97TH STREET
City-St-Zip: BAY HARBOR, FL 33154

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JIMENEZ, GABY
Address: 1001 91 ST.
City-St-Zip: BAY HARBOR, FL 33154

Title: VP () Change (X) Addition
Name: DAVID, JAIME
Address: 1001 91 ST.
City-St-Zip: BAY HARBOR, FL 33154

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: GABY JIMENEZ

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date