

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P07000026011

**FILED**  
**Dec 17, 2010**  
**Secretary of State**

**Entity Name:** BEST EDUCATION SERVICES & TUTORING, INC.

**Current Principal Place of Business:**

11441 SW 110 LN  
MIAMI, FL 33176

**New Principal Place of Business:**

8390 NW 68 STREET  
MIAMI, FL 33166

**Current Mailing Address:**

11441 SW 110 LN  
MIAMI, FL 33176

**New Mailing Address:**

8390 NW 68 STREET  
MIAMI, FL 33166

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PUIG-CORVE, OSCAR  
11441 SW 110 LN  
MIAMI, FL 33176 US

**Name and Address of New Registered Agent:**

PUIG-CORVE, OSCAR  
8390 NW 68 STREET  
MIAMI, FL 33166 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: OSCAR PUIG-CORVE

Electronic Signature of Registered Agent

12/17/2010

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: OSCAR, PUIG-CORVE  
Address: 8390 NW 68 STREET  
City-St-Zip: MIAMI, FL 33166

I hereby 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 all other like empowered.

SIGNATURE: OSCAR PUIG-CORVE

Electronic Signature of Signing Officer or Director

D

12/17/2010

Date