

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000083935

FILED
Apr 19, 2012
Secretary of State

Entity Name: BEST MEDICAL SERVICES, INC.

Current Principal Place of Business:

5190 NW 167 ST
STE. 215
MIAMI GARDENS, FL 33014

New Principal Place of Business:

Current Mailing Address:

5190 NW 167 ST
STE. 215
MIAMI GARDENS, FL 33014

New Mailing Address:

FEI Number: 26-0685549

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

URRA, JOEL
5190 NW 167 ST
STE. 215
MIAMI, FL 33014 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

OFFICERS AND DIRECTORS:

Title: PD
Name: URRA, JOEL
Address: 5190 NW 167 ST STE 215
City-St-Zip: MIAMI, FL 33014

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: JOEL URRA

PDT

04/19/2012

Electronic Signature of Signing Officer or Director

Date