

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000013387

FILED
Sep 11, 2009
Secretary of State

Entity Name: BEST PLY SUPPLIES IMPORT & EXPORT INC.

Current Principal Place of Business:

27238 SW 143 AVE.
HOMESTEAD, FL 33032

New Principal Place of Business:

2379 W 9 LANE
HIALEAH, FL 33010

Current Mailing Address:

27238 SW 143 AVE.
HOMESTEAD, FL 33032

New Mailing Address:

2379 W 9 LANE
HIALEAH, FL 33010

FEI Number: 26-1905980

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARANGUREN, JUAN M
27238 SW 143 AVE.
HOMESTEAD, FL 33032 US

Name and Address of New Registered Agent:

ARANGUREN, JUAN M
2379 W 9 LANE
HIALEAH, FL 33010 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:

09/11/2009

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: PD () Delete
Name: ARANGUREN, JUAN M
Address: 27238 SW 143 AVE.
City-St-Zip: HOMESTEAD, FL 33032

Title: SD () Delete
Name: ARANGUREN, JUAN A
Address: 27238 SW 143 AVE.
City-St-Zip: HOMESTEAD, FL 33032

Title: TD () Delete
Name: ARES, MANUEL
Address: 2240 W 10 AVE
City-St-Zip: HIALEAH, FL 33010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ARANGUREN, JUAN M
Address: 2379 W 9 LANE
City-St-Zip: HIALEAH, FL 33010

Title: SD (X) Change () Addition
Name: ARANGUREN, JUAN A
Address: 2379 W 9 LANE
City-St-Zip: HIALEAH, FL 33010

Title: TD (X) Change () Addition
Name: ARES, MANUEL
Address: 2379 W 9 LANE
City-St-Zip: HIALEAH, FL 33010

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: MANNUEL ARES

S

09/11/2009

Electronic Signature of Signing Officer or Director

Date