

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000029083

FILED
Apr 30, 2009
Secretary of State

Entity Name: A&Z BEST INTERNATIONAL CORP

Current Principal Place of Business:

1717 N BAYSHORE DR
STE 2939
MIAMI, FL 33132 US

New Principal Place of Business:

1717 N BAYSHORE DR
STE 2842
MIAMI, FL 33132 US

Current Mailing Address:

1717 N BAYSHORE DR
STE 2939
MIAMI, FL 33132 US

New Mailing Address:

1717 N BAYSHORE DR
STE 2842
MIAMI, FL 33132 US

FEI Number: 26-2215838

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVAREZ, ZOILA L
1717 N BAYSHORE DR
STE 2939
MIAMI, FL 33132 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALVAREZ, ZOILA L
Address: 1717 N BAYSHORE DR STE 2939
City-St-Zip: MIAMI, FL 33132 US

Title: VP () Delete
Name: RODRIGUEZ, ALMA
Address: 4750 N BAY RD
City-St-Zip: MIAMI BEACH, FL 33140 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ZOILA ALVAREZ

P

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date