## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000035804

Entity Name: BEST SOLUTION IMPORT EXPORT, INC.

1571 S TREASURE DR

NORTH BAY VILLAGE, FL 33141

Address:

City-St-Zip:

FILED Mar 30, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1571 S. TREASURE DR. 8123 NW 29 STREET N. BAY VILLAGE, FL 33141 DORAL, FL 33122 **Current Mailing Address: New Mailing Address:** 1571 S. TREASURE DR. N. BAY VILLAGE, FL 33141 FEI Number: 65-0577985 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SANTOS, NELDO 1571 S. TREASURE DR. N. BAY VILLAGE, FL 33141 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition SANTOS, NELDO Name: Name: 1571 S. TREASURE DR. Address: Address: City-St-Zip: N. BAY VILLAGE, FL 33141 City-St-Zip: Title: VPD () Delete Title: () Change () Addition Name: FIGUEROA, BEDZAIDA 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: NELDO SANTOS PRES 03/30/2009