

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000039845

FILED
Apr 04, 2003
Secretary of State

Entity Name: BEST INTRODUCTIONS, INC.

Current Principal Place of Business:

5600 N FLAGLER DR
STE 2210
W PALM BCH, FL 33407 US

New Principal Place of Business:

Current Mailing Address:

5600 N FLAGLER DR
STE 2210
W PALM BCH, FL 33407 US

New Mailing Address:

FEI Number: 65-0581904 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLIASANTI-EMILIANI, STEFANO
5600 N FLAGLER DR #2210
WEST PALM BEACH, FL 33407 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: CEO () Delete
Name: COLASANTI-EMILIANI, STEFANO
Address: 5600 N FLAGLER DR #2210
City-St-Zip: W PALM BCH, FL 33407 US

Title: PS () Delete
Name: PICA, MARCO
Address: 5600 N FLAGLER DR #2210
City-St-Zip: WEST PALM BEACH, FL 33407

Title: T () Delete
Name: PICA, ALESSANDRO
Address: 5600 N FLAGLER DR #2210
City-St-Zip: WEST PALM BEACH, FL 33407

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: COLASANTI-EMILIANI, STEFANO
Address: 5600 N FLAGLER DR #2210
City-St-Zip: W PALM BCH, FL 33407 US

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

Title: T/M/P (X) Change () Addition
Name: PICA, ALESSANDRO
Address: 5600 N FLAGLER DR #2210
City-St-Zip: WEST PALM BEACH, FL 33407

Title: S () Change (X) Addition
Name: COLASANTI-EMILIANI, STEFANO
Address: 5600 N. FLAGLER DR. SUITE 2210
City-St-Zip: WEST PALM BEACH, FL 33407

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEFANO COLASANTI-EMILIANI

S

04/04/2003

Electronic Signature of Signing Officer or Director

_____ Date