

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000020869

FILED
Apr 09, 2002 8:00 AM
Secretary of State

Entity Name: BEST DOLLAR SHOW, CORP.

Current Principal Place of Business:

8595 N.W. 186TH STREET
MIAMI, FL 33015

New Principal Place of Business:

231 HOUGH DR.
MIAMI SPRINGS, FL 33166

Current Mailing Address:

8595 N.W. 186TH STREET
MIAMI, FL 33015

New Mailing Address:

231 HOUGH DR.
MIAMI SPRINGS, FL 33166

FEI Number: 65-0732783

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PENA, CARLOS F
8595 N.W. 186TH STREET
MIAMI, FL 33015

Name and Address of New Registered Agent:

PENA, CARLOS F
231 HOUGH DR.
MIAMI SPRINGS, FL 33166

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: CARLOS PENA

04/09/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PENA, CARLOS F
Address: 8595 N.W. 186TH STREET
City-St-Zip: MIAMI, FL 33015

Title: SD () Delete
Name: PENA, LIDIA F
Address: 8595 N.W. 186TH STREET
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PENA, CARLOS F
Address: 231 HOUGH DR.
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: VP (X) Change () Addition
Name: PENA, LIDIA
Address: 231 HOUGH DR.
City-St-Zip: MIAMI SPRINGS, FL 33166

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: CARLOS PENA

PD

04/09/2002

Electronic Signature of Signing Officer or Director

Date