## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000015708

Entity Name: BEST HOME SERVICES, INC.

FILED Mar 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4295 NW 167 STREET 5951 NW 173RD DR

MIAMI, FL 33055 SUITE#3

MIAMI LAKES, FL 33015

Current Mailing Address: New Mailing Address:

4295 NW 167 STREET 5951 NW 173RD DR

MIAMI, FL 33055 SUITE #3

MIAMI LAKES, FL 33015

FEI Number: 65-0814494 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:

SUAREZ, FERNANDO
4295 NW 167 STREET
5951 NW 173RD DR
MIAMUEL 33055 LIS
SUITE # 2

MIAMI, FL 33055 US SUITE # 3
MIAMI LAKES, FL 33015 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.

in the date of Florida.

SIGNATURE: FERNANDO SUAREZ 03/04/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DM () Delete Title: P (X) Change () Addition

 Name:
 SUAREZ, FERNANDO
 Name:
 SUAREZ, FERNANDO

 Address:
 4295 NW 167 STREET
 Address:
 5951 NW 173RD DR SUITE # 3

 City-St-Zip:
 MIAMI, FL 33055
 City-St-Zip:
 MIAMI LAKES, FL 33015

Title: ( ) Delete Title: VP ( ) Change (X) Addition

 Name:
 Name:
 SUAREZ, CONSTANZA

 Address:
 Address:
 5951 NW 173RD DR SUITE # 3

 City-St-Zip:
 City-St-Zip:
 MIAMI LAKES, FL 33015

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: FERNANDO SUAREZ P 03/04/2009