2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000106956

1. Entity Name

NATIONS BEST MORTGAGE, INC.



Principal Place of Business

Mailing Address

3518 NORTHWEST 36TH STREET MIAMI, FL 33142

3518 NORTHWEST 36TH STREET MIAMI, FL 33142

FILED Feb 05, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01192007 No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0883521 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CARPIO, IDANIA 3518 NORTHWEST 36TH STREET

MIAMI, FL. 33142

DO NOT WRITE IN THIS SPACE

	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 the obligations of registered agent.	I am familiar with, and accept
SIC	SNATURE	

Si

Signature, typed or printed name of registered agent and title if applicable

6. Name and Address of Current Registered Agent

(NOTE, Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees 000000623298 02/13/07-80061-002 158.75

OFFICERS AND DIRECTORS 10. PΠ TITLE CARPIO, IDANIA NAME STREET ADDRESS 3518 NORTHWEST 36TH STREET CITY-ST-ZIP MIAMI, FL 33142 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

02-01-07

305-635-7600

Daytime Phone #