FILE NOW: FILING FEE AFTER MAY 1 IS $22[illegible]

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 28 PM 2:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V45852** **(3)**

1. Corporation Name

BEST ESTATE DEVELOPERS, INC.

Principal Place of Business	Mailing Address
85 W 55 ST **HIALEAH FL 33012**	**85 W 55 ST** **HIALEAH FL 33012**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **06/25/1992**

3a. Date of Last Report: **06/08/1994**

4. FEI Number: **65-0347262** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

BUENO, JUANA
85 W 55 ST
HIALEAH FL 33012

81 Na[illegible]
82 Str[illegible]
83
84 Ci[illegible]

10. Name and Address of New Registered Agent

e
t Address (P.O. Box Number is Not Acceptable)

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-name[illegible] or registered agent, or both, in the State of Florida. Such change was authorized by the corporati[illegible] familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

corporation submits this statement for the purpose of changing its registered office 's board of directors. I hereby accept the appointment as registered agent. I am

SIGNATURE _____ DATE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent sign[illegible] s required when mandating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	**PST**	1 1 TITLE ☐ Change ☐ Addition
NAME	**BUENO, RENE E.**	1 2 NAME
STREET ADDRESS	**85 W 55 ST**	1 3 STREET ADD[illegible]
CITY-ST-ZIP	**HIALEAH FL**	1 4 CITY-ST-ZI[illegible]
TITLE	**D**	2 1 TITLE ☐ Change ☐ Addition
NAME	**BUENO, RENE E.**	2 2 NAME
STREET ADDRESS	**85 W 55 ST**	2 3 STREET ADD[illegible]
CITY-ST-ZIP	**HIALEAH FL**	2 4 CITY-ST-ZI[illegible]
TITLE		3 1 TITLE ☐ Change ☐ Addition
NAME		3 2 NAME
STREET ADDRESS		3 3 STREET ADD[illegible]
CITY-ST-ZIP		3 4 CITY-ST-ZI[illegible]
TITLE		4 1 TITLE ☐ Change ☐ Addition
NAME		4 2 NAME
STREET ADDRESS		4 3 STREET ADD[illegible]
CITY-ST-ZIP		4 4 CITY-ST-Z[illegible]
TITLE		5 1 TITLE ☐ Change ☐ Addition
NAME		5 2 NAME
STREET ADDRESS		5 3 STREET ADD[illegible]
CITY-ST-ZIP		5 4 CITY-ST-ZI[illegible]
TITLE		6 1 TITLE ☐ Change ☐ Addition
NAME		6 2 NAME
STREET ADDRESS		6 3 STREET ADD[illegible]
CITY-ST-ZIP		6 4 CITY-ST-ZI[illegible]

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does no[illegible] qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true a[illegible] 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 e[illegible]ute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Rene Bueno RENE BUENO 4/13/95 305-883-1149

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0060078 CF