

**2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 09, 2012  
Secretary of State**

DOCUMENT# N08000006048

Entity Name: TRY YOUR BEST, INC.

**Current Principal Place of Business:**

16780 S.W. 62ND STREET  
SOUTHWEST RANCHES, FL 33331

**New Principal Place of Business:**

**Current Mailing Address:**

16780 S.W. 62ND STREET  
SOUTHWEST RANCHES, FL 33331

**New Mailing Address:**

FEI Number: 26-2990275      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LOWY, ALLEN  
16780 S.W. 62ND STREET  
SOUTHWEST RANCHES, FL 33331      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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LOWY, ALLEN  
Address: 16780 S.W. 62ND STREET  
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: T  
Name: LOWY, KIMBERLY  
Address: 16780 S.W. 62ND STREET  
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: S  
Name: HAMMOCK, HARVIN  
Address: 17850 S.W. 70TH PLACE  
City-St-Zip: SOUTHWEST RANCHES, FL 33331

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALLEN LOWY

P

01/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date