

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006208

Entity Name: ONLY THE BEST, INC.

FILED
Feb 16, 2009
Secretary of State

Current Principal Place of Business:

99-969 IWAENA ST.
AIEA, HI 96701

New Principal Place of Business:

Current Mailing Address:

99-969 IWAENA ST.
AIEA, HI 96701

New Mailing Address:

FEI Number: 99-0267118

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FISHER, TOUSEY, LEAS & BALL, P.A.
818 NORTH A1A - SUITE 104
PONTE VEDRA BEACH, FL 32082 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOLLANDER, MARK R
Address: 5687 KALANIANA'OLE HWY
City-St-Zip: HONOLULU, HI 96821

Title: V () Delete
Name: ROBERTSON, RONALD C
Address: 1674 OHAWAII PLACE
City-St-Zip: HONOLULU, HI

Title: S () Delete
Name: LAU, LORRAINE
Address: 99-155 OHEKANI LP
City-St-Zip: AIEA, HI 96701

Title: D () Delete
Name: GEIGER, JAMES
Address: 2067 LAUKAHI PL
City-St-Zip: HONOLULU, HI 96821

Title: AT () Delete
Name: KAGAWA, ANDREW
Address: 81-KAWANANAKOA PL
City-St-Zip: HONOLULU, HI 96817

Title: T (X) Delete
Name: TANIGUCHI, TODD G
Address: 104 HANO HANO PL
City-St-Zip: HONOLULU, HI 96825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANDREW KAGAWA

AT

02/16/2009

Electronic Signature of Signing Officer or Director

Date