

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000008421

FILED
Jul 20, 2005
Secretary of State

Entity Name: THE BEST IN REAL ESTATE, LLC

Current Principal Place of Business:

8320 WEST SUNRISE BOULEVARD, SUITE 100
PLANTATION, FL 33322

New Principal Place of Business:

Current Mailing Address:

8320 WEST SUNRISE BOULEVARD, SUITE 100
PLANTATION, FL 33322

New Mailing Address:

2500 WESTON RD
SUITE 105
WESTON, FL 33331

FEI Number: 81-0601856 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BRICENO, DOUGLAS
2500 WESTON ROAD
SUITE 105
WESTON, FL 33331 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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BRICENO, DOUGLAS
Address: 8320 WEST SUNRISE BOULEVARD, SUITE 100
City-St-Zip: MIAMI, FL 33322

Title: MGRM () Delete
Name: ORAM, MARC
Address: 8320 WEST SUNRISE BOULEVARD, SUITE 100
City-St-Zip: MIAMI, FL 33322

ADDITIONS/CHANGES:

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 for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DOUGLAS BRICEÑO

MGRM

07/20/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date