

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000008910

Entity Name: BESTNSHOW, LLC

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

757 SE 17TH ST
#826
FORT LAUDERDALE, FL 33316

New Principal Place of Business:

101 S FT. LAUDERDALE BEACH BLVD
#608
FORT LAUDERDALE, FL 33316

Current Mailing Address:

CINDY GARDERE, ACCOUNTANT
P O BOX 31046
SEA ISLAND, GA 31561

New Mailing Address:

CINDY GARDERE
100 IDAC LANE
ST SIMONS ISLAND, GA 31522

FEI Number: 30-0285212 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:

BOSTIC, ROBERT STEVEN
757 SE 17TH ST
#826
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

BOSTIC, ROBERT STEVEN
101 S FT LAUDERDALE BEACH BLVD
#608
FORT LAUDERDALE, FL 33316 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: ROBERT STEVEN BOSTIC

05/01/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BOSTIC, ROBERT S
Address: 757 SE 17THST #826
City-St-Zip: FORT LAUDERDALE, FL 33316

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BOSTIC, ROBERT S
Address: 101 S FT LAUDERDALE BEACH BLVD # 608
City-St-Zip: FORT LAUDERDALE, FL 33316

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 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: ROBERT STEVEN BOSTIC

MGR

05/01/2008

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