## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **DOCUMENT # L03000026763**

1. Entity Name

**BEST MOTOR WORKS & SPORT LLC** 



Principal Place of Business

65 SE 10TH AVE GAINESVILLE, FL 32601

Mailing Address

**65 SE 10TH AVE** 

GAINESVILLE, FL 32601

FILED Apr 13, 2007 08:00 AM Secretary of State



## DO NOT WRITE IN THIS SPACE

01192007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0116331

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Regulred

Davime Phone &

5. Name and Address of Current Registered Agent

VAZQUEZ, IVONNE 7621 NW 40 AVE GAINESVILLE, FL 32606

## DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$50:00 \ Due by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS		
TITLE \ NAME STREET ADDRESS CITY-ST-ZIP	MGR VAZQUEZ, IVONNE 7621 N.W. 40TH AVENUE GAINESVILLE, FL 32606		U00000704912 04/23/07-80029-009 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE , NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			