

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000028957

FILED
Apr 18, 2007
Secretary of State

Entity Name: BEST ONE FINANCIAL & INVESTMENT SERVICES LLC

Current Principal Place of Business:

3013 SW 107 AVE
MIAMI, FL 33165 US

New Principal Place of Business:

9425 SUNSET DR
170
MIAMI, FL 33173 US

Current Mailing Address:

3013 SW 107 AVE.
MIAMI, FL 33165 US

New Mailing Address:

9425 SUNSET DR
170
MIAMI, FL 33173 US

FEI Number: 42-1601073

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEST ONE INSURANCE, INC.
3013 SW 107 AVE
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

BEST ONE INSURANCE, INC.
9425 SUNSET DR
170
MIAMI, FL 33173 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: LUIS ORTEGA

04/18/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BEST ONE INSURANCE I, NC.
Address: 3013 SW 107 AVE
City-St-Zip: MIAMI, FL 33165

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BEST ONE INSURANCE I, NC.
Address: 9425 SUNSET DR SUITE 170
City-St-Zip: MIAMI, FL 33173

I hereby certify that the information supplied with this filing does not qualify for the 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: LUIS ORTEGA

P

04/18/2007

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