


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000055662 1. Entity Name BESTCORP INVESTMENTS, L.L.C.	
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Principal Place of Business 7230 SW 104 STREET PINECREST, FL 33156	Mailing Address 7230 SW 104 STREET PINECREST, FL 33156
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DO NOT WRITE IN THIS SPACE



04242008No Chg-LLC CR2E083 (12/07)

4. FEI Number 34-2009804	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GARCIA, GABRIELA M
7230 SW 104 STREET
PINECREST, FL 33156

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U00000986713
05/27/08-80020-019 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GARCIA, AGUSTIN J 7230 SW 104 STREET PINECREST, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GARCIA, FRANCISCO J 7230 SW 104 STREET PINECREST, FL 33156
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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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JAVIER GARCIA 4/20/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #