2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # L04000055789

1. Entity Name BEST BUY AUTO SALES LLC



FILED Feb 13, 2008 08:00 All Secretary of State

Principal Place of Business

4548 W. COLONIAL DRIVE

SUITE B

STREET ADDRESS CITY-ST-ZIP

ORLANDO, FL 32808

Mailing Address

C/O MICHELLE EISENHUTH 106 BEACH AVE

ALTAMONTE SPRINGS, FL 32701



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CR2E083 (12/07) Applied For 4. FEI Number 20-1421247 Not Applicable

5. Certificate of Status Desired

02022008 No Chg-LLC

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

EISENHUTH, MICHELLE E 106 BEACH AVENUE ALTAMONTE SPRINGS, FL 32701

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	bove named entity submits this statement for the purpose of challigations of registered agent.	nging its registered office or registered agent, or both, in the	ne State of Florida. I am familiar with, and accept
SIGNATU	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$138.75 — After May 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGRM		
NAME	EISENHUTH MICHELLE E	1	managaan aya

STREET ADDRESS 106 BEACH AVENUE CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32701 TITLÉ NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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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.

OR AUTHORIZED REPRESENTATIVE