

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086428

FILED
Apr 21, 2008
Secretary of State

Entity Name: BEST PROPERTIES INVESTMENTS, L.L.C.

Current Principal Place of Business:

3914 HAWKS CT.
WESTON, FL 33331

New Principal Place of Business:

Current Mailing Address:

3914 HAWKS CT.
WESTON, FL 33331

New Mailing Address:

FEI Number: 87-0736161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEZUBIRIA, RAMON
3914 HAWKS CT
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DEZUBIRIA, RAMON
Address: 3914 HAWKS CT
City-St-Zip: WESTON, FL 33331

Title: MGRM () Delete
Name: NEIRA, TACHI
Address: 3914 HAWKS CT
City-St-Zip: WESTON, FL 33331

Title: MGRM () Delete
Name: ORTIZ, WILLIAM
Address: 7680 NW 78 TERR
City-St-Zip: MEDLEY, FL 33166

Title: MGRM () Delete
Name: YEPES, MAURICIO
Address: CALLE 9A SUR #11-111
City-St-Zip: MEDELLIN, COLOMBIA, XX XX

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RAMON DE ZUBIRIA

MGRM

04/21/2008

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