

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000019430

Entity Name: TEN BEST LLC

FILED
Mar 27, 2006
Secretary of State

Current Principal Place of Business:

21113 JOHNSON STREET
SUITE #129
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

21113 JOHNSON STREET
SUITE #129
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 20-2524739

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WARTENBERG, ERNESTO
21113 JOHNSON STREET
SUITE #129
PEMBROKE PINES, FL 33029 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: WARTENBERG, ERNESTO
Address: 21113 JOHNSON STREET, SUITE #209
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGRM () Delete
Name: WARTENBERG, MARTHA
Address: 21113 JOHNSON STREET, SUITE #209
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WARTENBERG, ERNESTO
Address: 21113 JOHNSON STREET, SUITE #129
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGRM (X) Change () Addition
Name: WARTENBERG, MARTHA
Address: 21113 JOHNSON STREET, SUITE #129
City-St-Zip: PEMBROKE PINES, FL 33029

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: MARTHA WARTENBERG

MGMR

03/27/2006

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