


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 14, 2006 8:00 am
Secretary of State

02-27-2006 90430 007 ****50.00

DOCUMENT # L05000064684
 1. Entity Name
J & T BEST INVESTMENTS, LLC



Principal Place of Business Mailing Address
 8181 N.W. 36 STREET 8181 N.W. 36 STREET
 SUITE 27 SUITE 27
 MIAMI FL 33166 MIAMI FL 33166
 US US



2. Principal Place of Business 3. Mailing Address
8181 NW 36 St **10347 NW 56 Ter**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
Suite 27

1st MOORE CR2E083 (10/05)

City & State City & State
Miami FL **Miami FL**
 Zip Country Zip Country
33166 **USA** **33178** **USA**

4. FEI Number Applied For
20-3094714 Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
TANG, SIU F
8181 N.W. 36 STREET
SUITE 27
MIAMI FL 33166

7. Name and Address of New Registered Agent
 Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City **FL** Zip Code _____

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

9. MANAGING MEMBERS / MANAGERS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR TANG, SIU F 8181 N.W. 36 STREET, NO. 27 MIAMI FL 33166	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR TANG, KIT M 8181 N.W. 36 STREET, NO. 27 MIAMI-FL 33166	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete

10. ADDITIONS / CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR TANG, SIU F 10347' NW 56 Ter Doral FL 33178	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR TANG, KIT M 10347 NW 56 Ter Doral FL 33178	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #



ATTACHMENT

30002469

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 2, 2006

J & T BEST INVESTMENTS, LLC
10347 NW 56TH TERRACE
MIAMI, FL 33178 US

Subject: J & T BEST INVESTMENTS, LLC

Reference Number: L05000064684

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/JE
ANNUAL REPORTS SECTION