2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000105209

Title:

Name:

Address:

City-St-Zip:

MGRM

COHEN, SHARON G

NEW YORK, NY 10016

() Delete

320 EAST 35TH STREET - #4F

Entity Name: BEST RESTAURANTS OF AMERICA, LLC

FILED Jan 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8006 BELLAFIORE WAY BOYNTON BEACH, FL 33437 **Current Mailing Address: New Mailing Address:** 8006 BELLAFIORE WAY BOYNTON BEACH, FL 33437 FEI Number: 13-4314962 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: A1A REGISTERED AGENT INC. REISS, BARRY S 92 SADBERRY RD 8006 BELLAFIORE WAY QUINCY, FL 32351 US US BOYNTON BEACH, FL 33437 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: BARRY REISS 01/23/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete REISS, BARRY S Name: Name: 8006 BELLAFIORE WAY Address: Address: City-St-Zip: BOYNTON BEACH, FL 33437 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: REISS, NAOMI Name: Address: 8006 BELLAFIORE WAY Address: City-St-Zip: BOYNTON BEACH, FL 33437 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition COHEN, JEFFREY L Name: Name: Address: 320 EAST 35TH STREET - #4F Address: City-St-Zip: NEW YORK, NY 10016 City-St-Zip:

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.

Title:

Name:

Address:

City-St-Zip:

() Change () Addition

SIGNATURE: BARRY REISS MGRM 01/23/2007