2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 29, 2006
Secretary of State

DOCUMENT# L05000109066

Entity Name: BEST GIFTS BUY LLC.

Current Principal Place of Business:

2331 NORTH CENTRAL AVENUE
UNIT 108
KISSIMMEE, FL 34741 US

New Principal Place of Business:

2331 N. CENTRAL AVENUE
UNIT 108
KISSIMMEE, FL 34741 US

Current Mailing Address:

2331 NORTH CENTRAL AVENUE
UNIT 108
KISSIMMEE, FL 34741 US

New Mailing Address:

2331 N. CENTRAL AVENUE
UNIT 108
KISSIMMEE, FL 34741 US

FEI Number: 20-3776731 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ARSHAD, MIKE
2331 NORTH CENTRAL AVENUE
UNIT 108
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

AHMED, ARSHAD
2331 N. CENTRAL AVENUE
UNIT 108
KISSIMMEE, FL 34741 US

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: ARSHAD AHMED 05/29/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: ARSHAD, MIKE
Address: 2331 NORTH CENTRAL AVENUE
City-St-Zip: KISSIMMEE, FL 34741 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: AHMED, ARSHAD
Address: 2331 N. CENTRAL AVENUE
City-St-Zip: KISSIMMEE, FL 34741 US

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: ARSHAD AHMED MGRM 05/29/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date