

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000109066

Entity Name: BEST GIFTS BUY LLC.

FILED
Apr 02, 2008
Secretary of State

Current Principal Place of Business:

2906 CLIPPER COVE LN.
UNIT 102
KISSIMMEE, FL 34741 US

New Principal Place of Business:

Current Mailing Address:

2906 CLIPPER COVE LN.
UNIT 102
KISSIMMEE, FL 34741 US

New Mailing Address:

1661 PEREGRINE FALCONS WAY.
305
ORLANDO, FL 32837 US

FEI Number: 20-3776731

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AHMED, ARSHAD
2906 CLIPPER COVE LN.
UNIT 102
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

AHMED, ARSHAD
1661 PEREGRINE FALCONS WAY
305
ORLANDO, FL 32837 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

04/02/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: AHMED, ARSHAD
Address: 2906 CLIPPER COVE LN. UNIT 102
City-St-Zip: KISSIMMEE, FL 34741 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: AHMED, ARSHAD
Address: 1661 PEREGRINE FALCONS WAY, 305
City-St-Zip: ORLANDO, FL 32837 US

Title: MGR () Change (X) Addition
Name: GHUMMAN, FARRAH Z MGR
Address: 1661 PEREGRINE FALCONS WAY, 305
City-St-Zip: ORLANDO, FL 32837 US

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: ARSHAD AHMED

MGRM

04/02/2008

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