## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000093663

Entity Name: BEST SERVICES EXPERTS, LLC.

7818 COLONY LAKE DRIVE

City-St-Zip: BOYNTON BEACH, FL 33436

Address:

FILED May 19, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of B	New Principal Place of Business:		
	ONY LAKE DRIVE I BEACH, FL 33436				
Current Mailing Address:		New Mailing Address:	New Mailing Address:		
	ONY LAKE DRIVE I BEACH, FL 33436				
	: 22-3968610 FEI Number Applied For ( ) ce with s. 607.193(2)(b), F.S., the limited liability		Certificate of Status Desired()		
Name and	Address of Current Registered Agent	:: Name and Address of Ne	w Registered Agent:		
The above in the State	PR 33145 US named entity submits this statement for the e of Florida.	the purpose of changing its registered offi	ce or registered agent, or both,		
SIGNATUF					
	Electronic Signature of Registered	Agent	Date		
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGR ( ) Delete ARMAS, EUGENIA 7818 COLONY LAKE DRIVE BOYNTON BEACH, FL 33436	Title: ( ) C Name: Address: City-St-Zip:	Change ( ) Addition		
Title: Name:	MGR ( ) Delete ARMAS, IVAN	Title: ( ) C Name:	change ( ) Addition		
Address: City-St-Zip:	7818 COLONY LAKE DRIVE BOYNTON BEACH, FL 33436	Address: City-St-Zip:			
		City-St-Zip:	Change ( ) Addition		

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.

Address:

City-St-Zip:

SIGNATURE: IVAN ARMAS VICE 05/19/2009