


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 24, 2006 8:00 am**  
**Secretary of State**

03-24-2006 90022 015 \*\*\*150.00

DOCUMENT # P02000101957  
 1. Entity Name  
 BEST BUY AUTO BROKERS, INC.



Principal Place of Business      Mailing Address  
 12900 GULF BLVD                      12900 GULF BLVD  
 MADEIRA BEACH, FL 33708          MADEIRA BEACH, FL 33708

**DO NOT WRITE IN THIS SPACE**



02142006    No Chg-P    CR2E034 (11/05)

4. FEI Number 22-3873875	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
 LUPER, HANAN  
 12900 GULF BLVD  
 MADEIRA BEACH, FL 33708

**DO NOT WRITE IN THIS SPACE**

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 \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	LUPER, HANAN
STREET ADDRESS	12900 GULF BLVD
CITY-ST-ZIP	MADEIRA BEACH, FL 33708
TITLE	D
NAME	LUPER, ZVI
STREET ADDRESS	12900 GULF BLVD
CITY-ST-ZIP	MADEIRA BEACH, FL 33708
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Luper Hanan      Date: 3-15-06      Daytime Phone #: 772-392-9211  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR