

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000068642

**FILED**  
**Mar 13, 2009**  
**Secretary of State**

**Entity Name:** BEST OFFER AUTO SALES, INC

**Current Principal Place of Business:**

2320 HOLLYWOOD BLVD  
HOLLYWOOD, FL 33020 US

**New Principal Place of Business:**

100 GOLDEN ISLES DRIVE  
APT 204  
HALLANDALE, FL 33009 US

**Current Mailing Address:**

PO BOX 85184  
HALLANDALE BEACH, FL 33009 US

**New Mailing Address:**

**FEI Number:** 26-3025908      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HOFFMAN, LEVY, BENGIO & COMPANY, PL  
2320 HOLLYWOOD BLVD  
HOLLYWOOD, FL 33020 US

**Name and Address of New Registered Agent:**

KOHAVI, OFER  
100 GOLDEN ISLES DRIVE  
APT 204  
HALLANDALE, FL 33009 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: OFER KOHAVI

03/13/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: KOHAVI, OFFER  
Address: PO BOX 85184  
City-St-Zip: HALLANDALE BEACH, FL 33009 US

Title: SEC ( ) Delete  
Name: MALEK, MALGORZATA  
Address: 20225 NE 34TH CT #2213  
City-St-Zip: AVENTURA, FL 33180 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OFER KOHAVI

P

03/13/2009

Electronic Signature of Signing Officer or Director

Date