

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000123328

**Entity Name:** BAS-BEST AUTOMOTIVE SUPPLIER, LLC

**Current Principal Place of Business:**

3721 SE 13TH AVE  
CAPE CORAL, FL 33904

**Current Mailing Address:**

4430 ORCHID BLVD  
202  
CAPE CORAL, FL 33904

**FEI Number:** 26-2400521

**Certificate of Status Desired:** No

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

MANAGEMENT TAX CONSULTING, INC.  
4430 ORCHID BLVD  
202  
CAPE CORAL, FL 33904 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name HOEHNE, WOLFGANG  
Address DOROTHEENSTR. 5  
City-State-Zip: BREMEN 28201

Title MGRM  
Name MONTALDO, MAURO  
Address 5 VIA REGINA ELENA  
City-State-Zip: ANDEZENO 1020

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** WOLFGANG HOEHNE

MGRM

01/21/2014

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date