

5/6/200

5/6/2002-90189-04

FILED
Aug 13, 2002 8:00 am
Secretary of State

05-06-2002 90189 049 ****50.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000014043

1. Entity Name

INVOCUE INTERNATIONAL TRADING, LLC

Principal Place of Business

304 EAST LAKE ROAD, #200
PALM HARBOR FL 34880

Mailing Address

304 EAST LAKE ROAD, #200
PALM HARBOR FL 34880

2. Principal Place of Business

3. Mailing Address

Subs. Act. 6, etc.

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City & State

City & State

4. FEI Number

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

JACOBSON, RICHARD A
501 E. KENNEDY BLVD, SUITE 1700
TAMPA FL 33602

7. Name and Address of New Registered Agent

Name JOHN H. DAVIDSON
Street Address (P.O. Box Number is Not Acceptable)
1956 BAYSHORE BLVD
City DUNEDIN FL Zip Code 34698

8. The above named entity makes this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature needed upon renewal)

7/1/02

FILE NOW! FEE IS \$50.00

Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

10. ADDITONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	D. Pierluigi Carulli	Po Box 3008	CH 6901 Lugano Switzerland	<input type="checkbox"/> Delete
	President			<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 registered business enterprise to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE REQUIRED

4/22/02

PRINT NAME AND TYPE OF POSITION OF EACH MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date Date Printed