

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000106200

Entity Name: GPM GLOBAL VENTURES, LLC

FILED  
Apr 29, 2009  
Secretary of State

**Current Principal Place of Business:**

2489 BAY ISLE DRIVE  
WESTON, FL 33327

**New Principal Place of Business:**

**Current Mailing Address:**

2489 BAY ISLE DRIVE  
WESTON, FL 33327

**New Mailing Address:**

FEI Number: 80-0302423

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KAPLAN, MICHAEL A  
Address: 2489 BAY ISLE DRIVE  
City-St-Zip: WESTON, FL 33327

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

Title: MGRM ( ) Change (X) Addition  
Name: WEINBERGER, GARY I MD  
Address: 6283 BAY CLUB DRIVE #3  
City-St-Zip: FT. LAUDERDALE, FL 33308 US

Title: MGRM ( ) Change (X) Addition  
Name: SPEC OPS, LLC  
Address: 1651 S.W. 139 AVENUE  
City-St-Zip: DAVIE, FL 33325 US

Title: MGRM ( ) Change (X) Addition  
Name: CIOFFI, PIETRO  
Address: 6283 BAY CLUB DRIVE #3  
City-St-Zip: FT. LAUDERDALE, FL 33308

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.

SIGNATURE: MICHAEL KAPLAN

MGRM

04/29/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date