## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L98000001027

Entity Name: CARLING GROUP LLC

Mar 31, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1591 E ATLANTIC BLVD., SUITE 200 60 MARKET SQ. POMPANO BEACH, FL 33060 PO BOX 364 BELIZE, BL BELIZE

**Current Mailing Address: New Mailing Address:** 

1591 E ATLANTIC BLVD., SUITE 200 POMPANO BEACH, FL 33060

**FEI Number:** FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

CARLTON MANAGEMENT INC 1591 E. ATLANTIC BLVD., STE 200

FENCON LLC 1591 E. ATLANTIC BLVD., STE 200 POMPANO BEACH, FL 33060 POMPANO BEACH, FL 33060

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: MICHAEL BAKERJIAN 03/31/2003

> Electronic Signature of Registered Agent Date

## **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:**

MGRM () Change () Addition () Delete

CARLING CONSULTANTS, LTD. Name: Name: Address: P.O. BOX 107, OCEANIC HOUSE, DUKE STREET Address:

City-St-Zip: WEST INDIES. City-St-Zip:

Title: MGRM ( ) Delete Title: () Change () Addition

Name: SIMPKINS OVERSE4S SE, RVICES, INC. Name: Address: 60 MARKET SQUARE, P.O. BOX 364 Address: City-St-Zip: BELIZE. City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JERRY BAKERJIAN 03/31/2003