

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000037389

**Entity Name:** GLOBAL FLAT, LLC

**Current Principal Place of Business:**

17375 COLLINS AVE  
ROOM 1506  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

17375 COLLINS AVE  
ROOM 1506  
SUNNY ISLES BEACH, FL 33160 US

**FEI Number:** 20-2792188

**Certificate of Status Desired:** No

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

NASSIMOFF, CARLOS R  
17375 COLLINS AVE  
ROOM 1506  
SUNNY ISLES BEACH, FL 33160 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 NASSIMOFF, CARLOS R  
Address MALABIA 2430, 4 PISO, #2  
City-State-Zip: BUENOS AIRES BA 1425

Title MGRM  
Name SCHEMPER, LAURA C  
Address PRINGLES 599, #3  
City-State-Zip: BUENOS AIRES BS 1183

Title MGRM  
Name GUTVAY, SILVIA L  
Address MALABIA 2430, 4 PISO, #2  
City-State-Zip: BUENOS AIRES BS 1425

Title MGRM  
Name GOLDESTEN, JORGE I  
Address MALABIA 2430, 10 PISO, #2  
City-State-Zip: BUENOS AIRES BS 1425

Title MGRM  
Name LOWENSTEIN, DANIEL H  
Address EL SALVADOR 4430  
City-State-Zip: BUENOS AIRES BS 1414

*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:** CARLOS R NASSIMOFF

MR

04/26/2016

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

\_\_\_\_\_  
Date