2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 15, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000007163

1. Entity Name
GLOBAL DELIVERY ALLIANCE L.L.C.

Principal Place of Business	Mailing Address
780 NW 42ND AVE #416 MIAMI, FL 33126	780 NW 42ND AVE #416 MIAMI, FL 33126

01072004 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1019903
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

NOGUES, JULIO L
780 NW 42ND AVE #416
MIAMI, FL 33126

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	NOGUES, JULIO L
STREET ADDRESS	780 NW 42ND AVE #416
CITY-ST-ZIP	MIAMI, FL 33126
TITLE	MGR
NAME	DE NOGUES, TERESA DE ACHAVAL
STREET ADDRESS	COMESANA 4460
CITY-ST-ZIP	CIUDADELA, BUINOS AIRES, AR b1702 bod
TITLE	MGR
NAME	NOGUES, ERNESTO
STREET ADDRESS	COMESANA 4460
CITY-ST-ZIP	CIUDADELA, BUENOS AIRES, AR b1702 bod
TITLE	MGR
NAME	NOGUES, GASTON
STREET ADDRESS	COMESANA 4460
CITY-ST-ZIP	CIUDADELA, BUENOS AIRES, AR b1702 bod
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/15/04-80102-006 50.00

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11. I hereby certify that the information supplied with this filing does not qualify 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 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: X [signature] JULIO L. NOGUES, MGR. 3/12/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #