2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 08, 2002 8:00 am Secretary of State DOCUMENT # L0100006731 05-08-2002 90085 033 ****50.00 GLOBAL TRADING AND INVESTMENTS, LLC Principal Place of Business Mailing Address 888 BRICKELL DR., APT, 1707 888 BRICKELL DR., APT, 1707 9569.68 MIAMI FL 33131 MIAMI FL 33131 2. Principal Place of Business 3. Mailing Address 1111 BRICKELL AVE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 1122 City & State City & State 4. FEI Number Applied For MIAM 65-1104664 Not Applicable Zip Zip Country Country \$5.00 Additional MINDADC 5. Certificate of Status Desired 33 / 3 / Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ... _-CORPORATION COMPANY OF MIAMI Street Address (P.O. Box Number is Not Acceptable) ATTENTION: RF 201 S. BISCAYNE BLVD., STE. 1500 (RF) **MIAMI FL 33131** City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 ./ 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES TITLE PRESIDENT ☐ Delete TITLE ☐ Addition Change BURAK EYILIK NAME NAME 1111 Brickell ANA SUTTE 1/22 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete ,TITLE := Change Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-2IF CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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.

THORIZED REPRESENTATIVE