2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000012320

Name:

Address:

City-St-Zip:

300 S ORANGE AVENUE STE 1100

ORLANDO, FL 32801

Entity Name: GLOBAL ASSETS ADVISORS, LLC

FILED Jan 05, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 300 S ORANGE AVENUE STE 1100 ORLANDO, FL 32801 **Current Mailing Address: New Mailing Address:** 300 S ORANGE AVENUE STE 1100 ORLANDO, FL 32801 FEI Number: 59-3746852 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FRANKEL, MENASHE 300 S. ORANGE AVENUE, SUITE 1100 ORLANDO, FL 32801 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/MEMBERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete LAKESIDE ASSETS, LLC, Name: Name: Address: 300 S ORANGE AVENUE STE 1100 Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: FRANKEL, MENASHE Name: Address: 300 S ORANGE AVENUE STE 1100 Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip: Title: MGR () Delete Title: () Change () Addition CUFF, SHERI M Name: Name: 300 S ORANGE AVENUE STE 1100 Address: Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip: Title: MGR () Delete Title: () Change () Addition WARD, MICHAEL M

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MICHAEL WARD 01/05/2005