2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #L02000008253

1. Entity Name

GLOBAL MEDIA ENTERTAINMENT, LLC



FILED Sep 25, 2003 8:00 am Secretary of State

09-25-2003 90042 020 ****50.00

			1	SO WE TRO						
Principal Plac	e of Business	Mailing Address		*	7					
09 PLYMOUTH RD NEST PALM BEACH FL 33405		509 PLYMOUTH RD WEST PALM BEACH FL 33	3405							
					11811					
2. Principal P	lace of Business	3. Mailing Address	3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & Stat	е	City & State	City & State			4. FEI Number Applie 38 – 3648039 Not A]
Zip Country		Zip	Zip Count		5. Certificate of Status Desired		_ \$	5.00 Ad	5.00 Additional e Required	
6. Name and Address of Current Registered Agent			<u></u>		7. Name ar	d Address of New R	egistered A	gent		1
MEDI	NA IECHO			Name						Ì
MEDINA, JESUS 509 PLYMOUTH RD WEST PALM BEACH FL 33405				Street Address (P.O. Box Number is Not Acceptable)						
WES	PALM DEACH PL 33403									
			City	<u>. </u>		FL	Zip Cod			
	named entity submits this statement ions of registered agent.	for the purpose of changing it	ts register	ed office or registe	ered agent, or b	oth, in the State of Flo	rida. I am fa	miliar with,	, and accept	
						69-	- 77	- G=	΄.	
SIGNATURE	Signature, typed or primed name of registered ag	ent and title if applicable. (NO	TE: Registere	d Agent signature require	ed when reinstating)		DATE			
3 * 1		FILEN	IOW!!! I	EE IS \$50.00						1
* F	· () ,	Make Check Payat								
		Due B	y Septei	mber 24, 2003						
9.	MANAGING MEM	BERS/MANAGERS	10.			ADDITIONS/	CHANGES			_ [
TITLE	MGRM	☐ Delete	TITLE					☐ Change	☐ Addition	4/03
NAME CYPTCE ADOREDO	MEDINA, DOMINGA R		NAM	_						1 -
STREET ADDRESS CITY-ST-ZIP	509 PLYMOUTH RD	•	1	ET ADDRESS - ST-ZIP						10 H
	WEST PALM BEACH FL 33405 MGRM					· <u></u>		Change	Addition	۱à
TITLE NAME	MEDINA, EDUARDO JR	Delete	TITLE NAM					Change	☐ Addition	١
STREET ADDRESS	5612 S. DIXIE HWY			ET ADDRESS						ĺ
CITY-ST-ZIP	WEST PALM BEACH FL 33405	5	CITY	-ST-ZIP						ł
TITLE	MGRM	Delete	TITLE	:				Change	Addition	1
NAME	MEDINA, FRANCISCO	- James Partie 19 19 19	NAM	E				-		ļ
STREET ADDRESS	509 PLYMOUTH RD			ET ADDRESS						
CITY-ST-ZIP	WEST PALM BEACH FL 33405	<u> </u>	CiTY	-ST-ZIP						ļ
TITLE		☐ Delete	TITLE					Change	☐ Addition	Ì
NAME			NAM							
STREET ADORESS CITY-ST-ZIP				ET ADDRESS - ST-ZIP						
	<u> </u>	□ Delete						Change	- Addition	ł
TITLE NAME		Delete	TITLE NAMI	1				☐ Change	☐ Addition	1
STREET ADDRESS				ET ADDRESS						l
CITY-ST-ZIP			CITY	-ST-ZIP						
TITLE		□ Delete	TITLE	:				☐ Change	Addition	1
NAME			NAMI							
STREET ADDRESS				ET ADDRESS					ļ	ĺ
CITY-ST-ZIP	<u> </u>			-ST-ZIP			-			
 I hereby of indicated limited lial 	ertify that the information supplied v on this report is true and accurate a bility company or the receiver or trus	vith this filing does not qualify found that my signature shall have stee empowered to execute this	or the exer e the same s report as	mption stated in S e legal effect as if required by Char	ection 119.07(3 made under oa oter 608, Florida)(i), Florida Statutes. I h; that I am a manag i Statutes.	further certifing member	y that the is or manage	nformation er of the	

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER OR AUTHORIZED REPRESENTATIVE