2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 03, 2005
Secretary of State

DOCUMENT# L02000019905

Entity Name: GLOBE BIZ, LLC

Current Principal Place of Business:

5630 NASSAU DR
BOCA RATON, FL 33487

New Principal Place of Business:

642 EDDY STREET
BOCA RATON, FL 33482

Current Mailing Address:

5630 NASSAU DR
BOCA RATON, FL 33487

New Mailing Address:

642 EDDY STREET
BOCA RATON, FL 33482

FEI Number: 54-2069127 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JALANE, AMAL
5630 NASSAU DR
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

JALANE, AMAL
642 EDDY STREET
BOCA RATON, FL 33482 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: HAKIM BOUKARROU 03/03/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: JALANE, AMAL
Address: 5630 NASSAU DR
City-St-Zip: BOCA RATON, FL 33487

Title: MGR ( ) Delete
Name: BOUKARROU, HAKIM
Address: 5630 NASSAU DR
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: JALANE, AMAL
Address: 642 EDDY STREET
City-St-Zip: BOCA RATON, FL 33482

Title: MGR (X) Change ( ) Addition
Name: BOUKARROU, HAKIM
Address: 642 EDDY STREET
City-St-Zip: BOCA RATON, FL 33482

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.

SIGNATURE: HAKIM BOUKARROU MGR 03/03/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date