

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 24, 2003 8:00 am
Secretary of State

02-24-2003 90053 013 ****55.00

DOCUMENT # L02000029083

1. Entity Name

MARKIE'S GLOBAL INVESTMENTS LLC



Principal Place of Business

**4960 SW 72 AVE. #307
MIAMI FL 33155**

Mailing Address

**4960 SW 72 AVE. #307
MIAMI FL 33155**

2. Principal Place of Business

3. Mailing Address

7080 NW 50th Street
Suite, Apt. #, etc.

7080 NW 50th Street
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

MIAMI Florida

City & State

MIAMI Florida

4. FEI Number

06-1659765

Applied For

Not Applicable

Zip

33166

Country

USA

Zip

33166

Country

USA

5. Certificate of Status Desired

☒ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ESCOBAR, MARCELLA
4960 SW 72 AVE. #307
MIAMI FL 33155**

Name **ESCOBAR, MARCELLA**

Street Address (P.O. Box Number is Not Acceptable)

7080 NW 50th Street

City **MIAMI**

FL

Zip Code **33166**

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]
Signature, typed or printed name of registered agent and title if applicable.

MARCELLA ESCOBAR MGRM

2/20/03

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Florida Department of State

Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

10.

ADDITIONS/CHANGES

TITLE **MGRM**
NAME **ESCOBAR, MARCELLA**
STREET ADDRESS **4960 SW 72 AVE. #307**
CITY-ST-ZIP **MIAMI FL 33155**

☐ Delete

TITLE **MGRM**
NAME **ESCOBAR, MARCELLA**
STREET ADDRESS **7080 NW 50th Street**
CITY-ST-ZIP **MIAMI FL 33166**

☒ Change ☐ Addition

TITLE **MGRM**
NAME **STROOT, BRAM**
STREET ADDRESS **4960 SW 72 AVE. #307**
CITY-ST-ZIP **MIAMI FL 33155**

☐ Delete

TITLE **MGRM**
NAME **STROOT, BRAM**
STREET ADDRESS **7080 NW 50th Street**
CITY-ST-ZIP **MIAMI FL 33166**

☒ Change ☐ Addition

TITLE **MGRM**
NAME **DOERGA, TURHANE**
STREET ADDRESS **4960 SW 72 AVE. #307**
CITY-ST-ZIP **MIAMI FL 33155**

☐ Delete

TITLE **MGRM**
NAME **DOERGA, TURHANE**
STREET ADDRESS **7080 NW 50th Street**
CITY-ST-ZIP **MIAMI FL 33166**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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☐ Delete

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STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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:

[Signature]
MARCELLA ESCOBAR 2/20/03

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

Date

Daytime Phone #

305-470-7513

CR2E083 (10/02)