

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 09, 2008 8:00 am
Secretary of State

01-09-2008 90019 005 ***138.75

DOCUMENT # L03000015127

1. Entity Name
GLOBAL FUTURE INVESTMENTS, L.L.C.



Principal Place of Business
3449 SHALLOT DR. # 105
ORLANDO, FL 32835

Mailing Address
P.O. BOX 2306
WINDERMERE, FL 34786

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01052008 Chg-LLC CR2E083 (12/06)

4. FEI Number
20-0007499

Applied For
Not Applicable

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

FRANK, ANNE
8905 CHARELSTON PARK
ORLANDO, FL 32819

Name FRANK, ANNE

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

3449 SHALLOT DR. # 105

City ORLANDO

FL

Zip Code 32835

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 Anne Frank

1/7/08

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME MGRM
STREET ADDRESS FRANK, ANNE
CITY-ST-ZIP 8905 CHARLESTON PARK
ORLANDO, FL 32819 ☐ Delete

TITLE
NAME MGRM
STREET ADDRESS FRANK, ANNE
CITY-ST-ZIP 3449 SHALLOT DR. # 105
ORLANDO, FL 32835 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Anne Frank

Anne Frank

1/7/08

407-864-9595

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

Date

Daytime Phone #