

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000043683

**FILED**  
**Mar 30, 2006**  
**Secretary of State**

**Entity Name:** GLOBAL COMMERCIAL INVESTMENT REALTY, LLC

**Current Principal Place of Business:**

1545 NORTH PARK DRIVE  
SUITE #104  
WESTON, FL 33326

**New Principal Place of Business:**

17160 ROYAL PALM BLVD  
SUITE #2  
WESTON, FL 33326

**Current Mailing Address:**

1545 NORTH PARK DRIVE  
SUITE #104  
WESTON, FL 33326

**New Mailing Address:**

17160 ROYAL PLAM BLVD  
SUITE #2  
WESTON, FL 33326

**FEI Number:** 74-3109555

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROSEN, HARRY M  
2500 WESTON ROAD  
SUITE 220  
WESTON, FL 33331 US

**Name and Address of New Registered Agent:**

ORTIZ, DAVID  
17160 ROYAL PALM BLVD  
SUITE 2  
WESTON, FL 33326 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: DAVID ORTIZ

03/30/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ORTIZ, DAVID  
Address: 1545 NORTH PARK DRIVE, SUITE 104  
City-St-Zip: WESTON, FL 33326

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ORTIZ, DAVID  
Address: 17160 ROYAL PALM BLVD, SUITE 2  
City-St-Zip: WESTON, FL 33326

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DAVID ORTIZ

MGNR

03/30/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date