

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000083529

Entity Name: GLOBAL COMMERCE GROUP LLC

FILED
Jun 16, 2006
Secretary of State

Current Principal Place of Business:

5500 NW 114TH AVE
#102
MIAMI, FL 33178

New Principal Place of Business:

1255 JASMINE CIRCLE
WESTON, FL 33326

Current Mailing Address:

5500 NW 114TH AVE
#102
MIAMI, FL 33178

New Mailing Address:

1255 JASMINE CIRCLE
WESTON, FL 33326

FEI Number: 30-0283649 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

NATHOO, ELIZABETH R
1255 JASMINE CIRCLE
WESTON, FL 33326 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MRGM () Delete
Name: MANJI, BASHIR A MR.
Address: 5500 NW 114TH AVE, #102
City-St-Zip: MIAMI, FL 33178

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MANJI, BASHIR A MR.
Address: 1255 JASMINE CIRCLE
City-St-Zip: WESTON, FL 33326

Title: MGR () Change (X) Addition
Name: MANJI, MARIA S MRS.
Address: 1255 JASMINE CIRCLE
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: BASHIR A. MANJI

MGRM

06/16/2006

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