## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000012427

1. Entity Name
GLOBAL ENERGY DYNAMICS LLC



FILED Apr 05, 2007 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

3500 MYSTIC POINT DRIVE #3205 AVENTURA, FL 33180 3500 MYSTIC POINT DRIVE #3205 AVENTURA FL 33180



04012007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2343060 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

-6. Name and Address of Current Registered Agent - -

DEMOS, PETER 3500 MYSTIC POINT DRIVE #3205 AVENTURA, FL 33180

## DO NOT WRITE IN THIS SPACE

04-01-07

|  |  |                     |                               | IN THIS      | S SPACE                                  |   |
|--|--|---------------------|-------------------------------|--------------|--|---|
| 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, typed or printed name of registered agent and title if applicable | (NOTE: Populared    | Agent signature required when | -            | DATE                                     | _ |
|  | September, typed or printed mana or registered agent and site in appropria   | (NOTE: Hegistered A | Agent agrature required wher  | reinstating) | DATE                                     |   |
| Filing Fee is \$50.00 Due by May 1, 2007   |  |                     |                               |              |  |   |
| 9.   | MANAGING MEMBERS/MANAGERS  |                     |                               |              |  |   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | MGRM DEMOS, PETER 3500 MYSTIC POINT DRIVE #3205 AVENTURA, FL 33180           |                     | H0000692229                   |              |  |   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |  |                     |                               | 04           | 000000692229<br>04/13/07-80043-010 55.00 |   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |  |                     |                               | DO NO        | T WRITE                                  |   |
| THILE NAME STREET ADDRESS CITY-ST-ZIP  |  |                     |                               | IN THIS      | S SPACE                                  |   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |  |                     |                               |              |  |   |
| NAME STREET ADDRESS CITY-ST-ZIP  |  |                     |                               |              |  |   |
| 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. |  |                     |                               |              |  |   |

BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE