2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 08, 2006
Secretary of State

DOCUMENT# L05000119997

Entity Name: GLOBAL BUSINESS ALLIANCES LLC

Current Principal Place of Business:

WORLD TRADE CENTER 1101 CHANNELSIDE DRIVE
SUITE 244
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

4095 STATE ROAD 7,
SUITE 'L' # 205
LAKE WORTH, FL 33467

New Mailing Address:

FEI Number: 20-3945782 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NADGONDE, BHAIRAVI
1487 RUNNING OAK LANE
ROYAL PALM BEACH, FL 33411 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: MGRM ( ) Delete
Name: BHAIRAVI, NADGONDE
Address: 1487 RUNNING OAK LANE
City-St-Zip: ROYAL PALM BEACH, FL 33411

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

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

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM ( ) Change (X) Addition
Name: KRISHNA, TRIPURANENI
Address: 1157 SOUTH STATE ROAD 7
City-St-Zip: WELLINGTON, FL 33414

Title: O ( ) Change (X) Addition
Name: SURESH, NADGONDE
Address: 1487 RUNNING OAK LANE
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: BHAIRAVI NADGONDE MGRM 03/08/2006

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