

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000068998

FILED
Dec 12, 2007
Secretary of State

Entity Name: GLOBAL QCS LLC

Current Principal Place of Business:

7512 DOCTOR PHILLIPS BOULEVARD
SUITE 50-278
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

7512 DOCTOR PHILLIPS BOULEVARD
SUITE 50-278
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 56-2598121 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POTTS, FRED R
7637 FENWICK COVE LANE
ORLANDO, FL 32819 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: POTTS, FRED R
Address: 7512 DOCTOR PHILLIPS BLVD SUITE 50-278
City-St-Zip: ORLANDO, FL 32819

Title: MGRM () Delete
Name: GONZALEZ, J
Address: 7512 DOCTOR PHILLIPS BOULEVARD
City-St-Zip: ORLANDO, FL 32819

Title: MGRM () Delete
Name: BENNES, JAMES
Address: 7512 DOCTOR PHILLIPS BOULEVARD
City-St-Zip: ORLANDO, FL 32819

Title: MGRM (X) Delete
Name: ANTONUCCI, JAMES F
Address: 7512 DOCTOR PHILLIPS BOULEVARD
City-St-Zip: ORLANDO, FL 32819

Title: MGRM (X) Delete
Name: POTTS, CHRISTOPHER E
Address: 7512 DOCTOR PHILLIPS BOULEVARD
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: ANTONUCCI, JAMES F
Address: 7512 DOCTOR PHILLIPS BOULEVARD
City-St-Zip: ORLANDO, FL 32819

Title: MGRM (X) Change () Addition
Name: POTTS, CHRISTOPHER E
Address: 7512 DOCTOR PHILLIPS BOULEVARD
City-St-Zip: ORLANDO, FL 32819

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

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

I hereby certify that the information supplied with this filing does not qualify 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: FRED POTTS

MGRM

12/12/2007

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