

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000023368

FILED
May 08, 2009
Secretary of State

Entity Name: GLOBAL CONSULTANTS & INVESTMENTS, LLC.

Current Principal Place of Business:

207 TROPIC ISLES DRIVE
108
DELRAY BEACH, FL 33483

New Principal Place of Business:

601 N. CONGRESS AVE
104-A
DELRAY BEACH, FL 33445

Current Mailing Address:

207 TROPIC ISLES DRIVE
108
DELRAY BEACH, FL 33483

New Mailing Address:

601 N. CONGRESS AVE
104-A
DELRAY BEACH, FL 33445

FEI Number: 42-1754285 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

BRATZOOM, MAYCO K
207 TROPIC ISLES DRIVE
108
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

BRATZOOM, MAYCO K
207 TROPIC ISLE DRIVE
108
DELRAY BEACH, FL 33483 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: MAYCO BRATZOOM

05/08/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BRATZOOM, MAYCO K
Address: 207 TROPIC ISLES DRIVE # 108
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BRATZOOM, MAYCO K
Address: 207 TROPIC ISLE DRIVE # 108
City-St-Zip: DELRAY BEACH, FL 33483

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: MAYCO BRATZOOM

MGR

05/08/2009

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