

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000034430

Entity Name: UNITED GLOBAL DEVELOPERS, LLC

FILED  
Sep 02, 2009  
Secretary of State

**Current Principal Place of Business:**

3234 S. SEMORAN BLVD, 15  
ORLANDO, FL 32822

**New Principal Place of Business:**

**Current Mailing Address:**

3234 S. SEMORAN BLVD, 15  
ORLANDO, FL 32822

**New Mailing Address:**

FEI Number: 26-2588013      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:**

**Name and Address of New Registered Agent:**

KURZBAN, MARVIN ESQ  
2650 S.W. 27TH AVE. SECOND FLOOR  
MIAMI, FL 33133 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CAGLAR, BURAK CAGDAS  
Address: 19501 EAST COUNTRY CLUB DR.  
City-St-Zip: AVENTURA, FL 33180

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

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: CAGLAR, BURAK CAGDAS  
Address: 3234 S. SEMORAN BLVD, 15  
City-St-Zip: ORLANDO, FL 32822

Title: MGR ( ) Change (X) Addition  
Name: ISIK, SERKAN  
Address: 3234 S. SEMORAN BLVD, 15  
City-St-Zip: ORLANDO, FL 32822

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: SERKAN ISIK

MGR

09/02/2009

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