

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L96000000484

FILED  
Aug 30, 2004  
Secretary of State

Entity Name: GLOBUS INTERNATIONAL L.C.

**Current Principal Place of Business:**

2470 DEL LARGO DR.  
FORT LAUDERDALE, FL 33316

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 460306  
FT. LAUDERDALE, FL 333460306

**New Mailing Address:**

FEI Number: 65-0747827

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GLOUKHOVSKOY, ALEXANDER  
2470 DEL LARGO DR.  
FORT LAUDERDALE, FL 33316

**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/MEMBERS:**

Title: V ( ) Delete  
Name: GLUKHOVSKOY, ALEXANDER  
Address: 2470 DEL DAGO AVE.  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: P ( ) Delete  
Name: ZATREPALEK, CHARLE  
Address: 1547 PROPERITY FARMS ROAD  
City-St-Zip: WEST PALM BEACH, FL 33403

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: GLUKHOVSKOY, ALEXANDER  
Address: 2470 DEL DAGO AVE.  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: MGRM (X) Change ( ) Addition  
Name: ZATREPALEK, CHARLE  
Address: 1547 PROPERITY FARMS ROAD  
City-St-Zip: WEST PALM BEACH, FL 33403

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALEXANDER GLUKHOVSKOY

MGRM

08/30/2004

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