LIMITED LIABILITY COMPANY FILED UNIFORM BUSINESS REPORT (UBR) 02 APR 29 AM 11: 45 L98000000938 DOCUMENT # SECRETARY OF STATE TALLAHASSEE, FLORIDA Glorius Pacific LC DO NOT WRITE IN THIS SPACE 2. Principal Place of Business Duval St <u> 1333 N.</u> N $\mathcal{E}\mathcal{E}\mathcal{E}$ DO NOT WRITE IN THIS SPACE Da hassee, FL Tallahassee 4. FEI Number Applied For Not Applicable Zip ろ08られ \$5.00 Additional 5. Certificate of Status Desired 7. Name and Address of Current Registered Agent **DO NOT WRITE** Filing & Search Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE N EEE Divial Zip Code 8. The above named entity submit whis statement for the pose of changing its registered office or registered agent, or both, i n the State of Florida. SIGNATURE FEE IS \$50.00 Make Check Payable to Department of State **DUE BY MAY 1** 9. MANAGING MEMBERS/MANAGERS TITLE MGR TITLE First Securities NAME NAME STREET ADDRESS PO BOX 362 STREET ADDRESS CITY-ST-ZIP Road Town Tortola CITY-ST-ZIP TITLE MGR TITLE 200005 NAME First Directors Limited NAME STREET ADDRESS FOBEX 362 STREET ADDRESS CITY-ST-7/P Torthea CITY-ST-ZIP Town. TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

11. I horeby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(indicated on this report is true and accurate and that my 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. I further certify that the information I am a managing member or manager of the less.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Janet M. Caruccio SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-7IP

4-24-02

FLORIDA FILING & SEARCH SERVICES, INC.

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DATE:

04-29-02

ACCOUNT NO:

FCA00000015

AUTHORIZATION:

ABBIE/PAUL HODGE

TYPE OF FILING: UNIFORM BUSINESS REPORTS

NAME: 34 LIMITED LIABILITY COMPANIES

SPECIAL INSTRUCTIONS: NONE

\$1700.00

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NUMBER OF DESTREATION