

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 92177 028 ****55.00

DOCUMENT # L99000005088

1. Entity Name
GLOBEX ENTERPRISES, LLC



Principal Place of Business
201 SOUTH ORANGE AVENUE, SUITE 1017
ORLANDO, FL 32801

Mailing Address
201 SOUTH ORANGE AVENUE, SUITE 1017
ORLANDO, FL 32801

2. Principal Place of Business

322 E. CENTRAL BLVD

Suite, Apt. #, etc.

SUITE 707

City & State

ORLANDO, FL

Zip

32801

Country

ORANGE

3. Mailing Address

322 E. CENTRAL BLVD

Suite, Apt. #, etc.

SUITE 707

City & State

ORLANDO, FL

Zip

32801

Country

ORANGE



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

59-3593012

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when registering)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS / MANAGERS

TITLE **MGR** ☐ Delete
NAME **NIAZY, AHMED NABIL**
STREET ADDRESS **201 SOUTH ORANGE AVENUE SUITE 1017**
CITY-ST-ZIP **ORLANDO, FL 32801**

TITLE **MGR** ☒ Delete
NAME **HAMOUDA, IBRAHIM AHMED**
STREET ADDRESS **201 SOUTH ORANGE AVENUE SUITE 1017**
CITY-ST-ZIP **ORLANDO, FL 32801**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE **MGR** ☒ Change ☐ Addition
NAME **NIAZY, AHMED NABIL**
STREET ADDRESS **322 E. CENTRAL BLVD, SUITE 707**
CITY-ST-ZIP **ORLANDO, FL 32801**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

AHMED NIAZY

04/30/03 (407) 999-9933

Date

Daytime Phone #

CR2E083 (10/02)