

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90274 008 ***150.00

DOCUMENT # L99000006282

1. Entity Name

GLOBAL REAL ESTATE INVESTMENTS, L.C.

DO NOT WRITE IN THIS SPACE

967692

2. Principal Place of Business
10620 N. KENDALL DR.

3. Mailing Address
11201 SW 111TH ST.

Suite, Apt. #, etc.
STE. 120

Suite, Apt. #, etc.

City & State
MIAMI, FL

City & State
MIAMI, FL.

Zip
33176

Country
US

Zip
33176

Country
US

4. FEI Number
65-0953588

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
HALE, GABRIELLE

Street Address (P.O. Box Number is Not Acceptable)
11201 SW 111TH ST.

City
MIAMI

FL

Zip Code
33176

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.

SIGNATURE

[Signature]

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-29-02

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE MANAGER
NAME HALE, GABRIELLE
STREET ADDRESS 11201 SW 111TH ST.
CITY - ST - ZIP MIAMI, FL. 33176

TITLE MEMBER
NAME PENGUIN REAL ESTATE, LLC.
STREET ADDRESS 10621 N. KENDALL DR. # 120
CITY - ST - ZIP MIAMI, FL. 33176

TITLE MEMBER
NAME RADO, GABOR
STREET ADDRESS 10621 N. KENDALL DR. # 120
CITY - ST - ZIP MIAMI, FL 33176

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IN THIS SPACE**

13. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-29-02 305-274-0193