

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 11, 2002 8:00 am
Secretary of State

03-07-2002 90151 008 ****55.00

DOCUMENT # L01000002230
1. Entity Name
 EMILIOS INTERNATIONAL, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 2121 PONCE DE LEON BLVD.
 Suite, Apt. #, etc.
SUITE 850
 City & State
CORAL GABLES, FLORIDA

3. Mailing Address
 999 PONCE DE LEON BLVD.
 Suite, Apt. #, etc.
SUITE 715
 City & State
CORAL GABLES, FLORIDA

DO NOT WRITE IN THIS SPACE

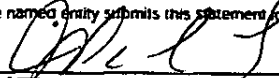
Zip Country Zip Country
 33134 USA 33134 USE

4. FEI Number 65-1123911
 Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
 Name
JOSE I. PADIAL
 Street Address (P.O. Box Number is Not Acceptable)
999 PONCE DE LEON BLVD. SUITE 715
 City State Zip Code
CORAL GABLES FL 33134

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  DATE **4-3-02**

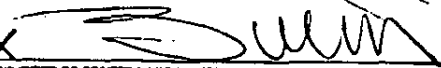
FEE IS \$50.00
 Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	MANAGER ALEJO PERALTA 2121 PONCE DE LEON BLVD STE 850 CORAL GABLES, FLORIDA 33134
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10. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  DATE **4/1/02**

CR2E083B (12/01)