


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000011979
1. Entity Name
F & C INTERNATIONAL INVESTMENTS, LLC



Principal Place of Business 2307 DOUGLAS RD 400 MIAMI, FL 33145 US	Mailing Address 2307 DOUGLAS RD 400 MIAMI, FL 33145 US
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DO NOT WRITE IN THIS SPACE



04282005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 04-3671413	Applied For Not Applicable
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5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
OVIES, IDA C
2307 DOUGLAS RD
400
MIAMI, FL 33145

**DO NOT WRITE
IN THIS SPACE**

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 reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FOURMENTAL, CARLOS J AV SANTA FE 9 PISO, DEPTO A BUENOS AIRES, BA 1425
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GARCIA FOURMENTEL, NOEMI J AV SANTA FE 9 PISO, DEPTO A BUENOS AIRES, BA 1425
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FOURMENTEL, FEDERICO G AV SANTA FE 9 PISO, DEPTO A BUENOS AIRES, BA 1425
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FOURMENTEL, MARIA C AV SANTA FE 9 PISO, DEPTO A BUENOS AIRES, BA 1425
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000350095
05/02/05-80090-025 50.00

**DO NOT WRITE
IN THIS SPACE**

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: CF Mgr 4/28/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #