


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000015371
 1. Entity Name
 EUROTECH DEVELOPMENT COMPANY, LLC



Principal Place of Business 11890 SW 8TH STREET, SUITE 500 MIAMI, FL 33184	Mailing Address 11890 SW 8TH STREET, SUITE 500 MIAMI, FL 33184
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DO NOT WRITE IN THIS SPACE



03212005No Chg-LLC CR2E083 (10/03)

4. FEI Number 22-3872061	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 CANTENS, GASTON E SR.
 11890 SW 8TH STREET, SUITE 500
 MIAMI, FL 33184

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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


9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PAREDES, FAUSTINO J 11890 SW 8TH STREET, SUITE 500 MIAMI, FL 33184
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO ENRIQUEZ, LUIS N 11890 SW 8TH STREET, SUITE 500 MIAMI, FL 33184
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SRVP FERNANDEZ, JOSE J 11890 SW 8TH STREET, SUITE 500 MIAMI, FL 33184
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SRVP CARBALLO, JULIO C 11890 SW 8TH STREET, SUITE 500 MIAMI, FL 33184
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO CANTENS, GASTON E SR 11890 SW 8TH STREET, SUITE 500 MIAMI, FL 33184
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 04/19/05-80035-020 55.00

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:  **Gaston E Cantens, Sr. CEO** **4/02/05** **305-227-3800**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #