


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

DOCUMENT # L02000029128 1. Entity Name NICOTERA, LLC	
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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



04282005No Chg-LLC CR2E083 (10/03)

4. FEI Number 59-3761857	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 _____ (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 CAPRIA, DOMINGO A JOSE C PAZ - 1015, ACASSUSO-CP(1641) BUENOS AIRES, BA 1641
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DE CAPRIA, YOLANDA CASAL JOSE C PAZ - 1015, ACASSUSO-CP(1641) BUENOS AIRES, BA 1641
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05/02/05-80090-022 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:   4/28/05 _____ Date _____ Daytime Phone # _____

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