2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 14, 2007
Secretary of State

DOCUMENT# L06000047729

Entity Name: JF INTERNATIONAL CONSULTING, LLC

Current Principal Place of Business:

PASEO DE LA REFORMA 2608, PISO 18
COLONIA LOMAS ALTAS, 11950, MEXICO D.F.
MEXICO, XX

New Principal Place of Business:

PASEO DE LA REFORMA 2608, PISO 18
COLONIA LOMAS ALTAS, 11950, MEXICO D.F.
MEXICO, MX

Current Mailing Address:

PASEO DE LA REFORMA 2608, PISO 18
COLONIA LOMAS ALTAS, 11950, MEXICO D.F.
MEXICO, XX

New Mailing Address:

PASEO DE LA REFORMA 2608, PISO 18
COLONIA LOMAS ALTAS, 11950, MEXICO D.F.
MEXICO, MX

FEI Number: 98-0496982 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVE..
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition
Name: FERNANDEZ, JORGE
Address: 201 ALHAMBRA CIRCLE
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JORGE FERNANDEZ MGR 08/14/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date