



2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 23, 2006 8:00 am
Secretary of State

03-23-2006 90260 025 ****55.00

DOCUMENT # M99000001112					
1. Entity Name PANAMERICAN BEVERAGES COMPANY L.L.C.					
Principal Place of Business 701 WATERFORD WAY, STE. 800 MIAMI, FL 33126			Mailing Address 9737 NW 41ST STREET, PMB 310 MIAMI, FL 33178		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CORPDIRECT AGENTS 515 EAST PARK AVE ATTN: ED LARY TALLAHASSEE, FL 32301				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL	Zip Code
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, 2006			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	MGRM	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORPORACION INTERAMERICANA DE BEBIDAS S.A.		NAME		
STREET ADDRESS	GUILLERMO GONZALEZ CAMARENA 600		STREET ADDRESS		
CITY-ST-ZIP	SANTA FE, MEXICO CITY, DF 01210		CITY-ST-ZIP		
TITLE	MGR	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SALAZAR, CARLOS		NAME		
STREET ADDRESS	GUILLERMO GONZALEZ CAMARENA 600		STREET ADDRESS		
CITY-ST-ZIP	SANTA FE, MEXICO CITY, DF 01210		CITY-ST-ZIP		
TITLE	MGR	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GARZA, ALFONSO		NAME		
STREET ADDRESS	GUILLERMO GONZALEZ CAMARENA 600		STREET ADDRESS		
CITY-ST-ZIP	SANTA FE, MEXICO CITY, DF 01210		CITY-ST-ZIP		
TITLE	MGR	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALDRETE, CARLOS		NAME		
STREET ADDRESS	GUILLERMO GONZALEZ CAMARENA 600		STREET ADDRESS		
CITY-ST-ZIP	SANTA FE, MEXICO CITY, DF 01210		CITY-ST-ZIP		
TITLE	MGR	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GONZALEZ, FERNANDO		NAME		
STREET ADDRESS	GUILLERMO GONZALEZ CAMARENA 600		STREET ADDRESS		
CITY-ST-ZIP	SANTA FE, MEXICO CITY, DF 01210		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 			MARK A. HART		2/17/06 305-593-5766
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date		Daytime Phone #