

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000104915

FILED
Apr 17, 2009
Secretary of State

Entity Name: INTERAMERICAN CORPORATE SERVICES LLC

Current Principal Place of Business:

2525 PONCE DE LEON BLVD.
SUITE 1225
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

2525 PONCE DE LEON BLVD.
SUITE 1225
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 33-1176147 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERNANDEZ, PATRICIA M
2525 PONCE DE LEON BLVD.
SUITE 1225
CORAL GABLES, FL 33134 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: MGR () Delete
Name: HERNANDEZ, PATRICIA M
Address: 2525 PONCE DE LEON BLVD., SUITE 1225
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR () Delete
Name: AVILA, ALCIDES I
Address: 2525 PONCE DE LEON BLVD., SUITE 1225
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR () Delete
Name: FERRI, MARCO
Address: 2525 PONCE DE LEON BLVD., SUITE 1225
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR () Delete
Name: BARRETO TERCILLA, MAGGIE
Address: 2525 PONCE DE LEON BLVD., SUITE 1225
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR () Delete
Name: GARRO, ASNARDO
Address: 2525 PONCE DE LEON BLVD., SUITE 1225
City-St-Zip: CORAL GABLES, FL 33134 US

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

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Change (X) Addition
Name: MENA, DANIEL O
Address: 2525 PONCE DE LEON BLVD., SUITE 1225
City-St-Zip: CORAL GABLES, FL 33134 US

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: ASNARDO GARRO

MGR

04/17/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date