

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000181731

Entity Name: ANTARES INTERNATIONAL INVESTMENTS, LLC**Current Principal Place of Business:**890 SOUTH DIXIE HIGHWAY
CORAL GABLES, FL 33146**Current Mailing Address:**890 SOUTH DIXIE HIGHWAY
CORAL GABLES, FL 33146 US**FEI Number:** 47-5423124**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CEBALLOS, HAYDEE CPA
890 SOUTH DIXIE HIGHWAY
CORAL GABLES, FL 33146 US*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**Authorized Person(s) Detail :**

Title	MGR
Name	SARAIVA, GILBERTO
Address	AVE UBERABA 1242 VILA VIRGINIA ITAQUAQUECE
City-State-Zip:	SAO PAULO SP 08573--070

Title	MGR
Name	SARAIVA, ANTERO
Address	AVE UBERABA 1242 VILA VIRGINIA ITAQUAQUECE
City-State-Zip:	SAO PAULO SP 08573--070

Title	MGR
Name	GONCALVES SARAIVA, DIEGO
Address	AVE UBERABA 1242 VILA VIRGINIA ITAQUAQUECE
City-State-Zip:	SAO PAULO SP 08573--070

Title	MGR
Name	DE SIQUEIRA SARAIVA, ANDRE
Address	AVE UBERABA 1242 VILA VIRGINIA ITAQUAQUECE
City-State-Zip:	SAO PAULO SP 08573--070

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GILBERTO SARAIVA**MANAGER****04/28/2016**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date