## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 26, 2007 08:00 AM Secretary of State

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1. Entity Name EIFFEL LLC



Principal Place of Business

1300 BRICKELL AVE. MIAMI, FL 33131 Mailing Address

1300 BRICKELL AVE. MIAMI, FL 33131



## DO NOT WRITE IN THIS SPACE

01312007 No Chg-LLC CR2E083 (11/05)

4. FEI Number	Applied For
43-1962053	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SANCHEZ, MILAGROS 1300 BRICKELL AVE. MIAMI, FL 33131

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the purpose of chaions of registered agent.	inging its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept		
SIGNATURE		(NOTE, Registered Agent signature required when reinstating)	DATE		
FI	iling Fee is \$50.00 ue by May 1, 2007				
9.	MANAGING MEMBERS/MANAGERS				
NAME STREET ADDRESS CITY-ST-ZIP	MGR FORTUNE INTERNATIONAL EQUITY CORP. 1300 BRICKELL AVE. MIAMI, FL 33131		1/00000679445		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			04/03/07-80038-012 50.00		
TITLE NAME STREET ADDRESS CITY-SI-ZIP		DO	NOT WRITE		
NAME STREET ADDRESS CHY-ST-ZIP		IN	IN THIS SPACE		
TITLE NAME					

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 mat 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 receipt or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP

NAME STREET ADDRESS CITY - ST - ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MA

D NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #