
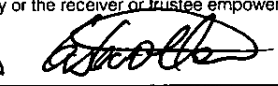


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90060 025 ****50.00

DOCUMENT # L03000004549 1. Entity Name FAVALCA USA, LLC					
Principal Place of Business 980 GOLDEN CANE DRIVE WESTON, FL 33327			Mailing Address 980 GOLDEN CANE DRIVE WESTON, FL 33327		
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	
TOVAR, ILEANA ARIAS 1725 MAIN STREET, SUITE 205 WESTON, FL 33326				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	FL
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
Filing Fee is \$50.00 Due by May 1, 2004		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MACHADO, OSVALDO 980 GOLDEN CANE DRIVE WESTON, FL 33327	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MACHADO, OSVALDO 980 GOLDEN CANE DRIVE WESTON, FL 33327	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PEROZO, LORENA 980 GOLDEN CANE DRIVE WESTON, FL 33327	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PEROZO, LORENA 980 GOLDEN CANE DRIVE WESTON, FL 33327	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MACHADO, SIMON 980 GOLDEN CANE DRIVE WESTON, FL 33327	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MACHADO, SIMON 980 GOLDEN CANE DRIVE WESTON, FL 33327	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MARTINEZ, ESTHER 980 GOLDEN CANE DRIVE WESTON, FL 33327	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MARTINEZ, ESTHER 980 GOLDEN CANE DRIVE WESTON, FL 33327	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 			04/22/04		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		