

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000023753

FILED
Feb 27, 2009
Secretary of State

Entity Name: ZOE INTERNATIONAL LLC

Current Principal Place of Business:

8895 FONTAINEBLUE BLVD., APT. 308
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

8895 FONTAINEBLUE BLVD., APT. 308
MIAMI, FL 33172

New Mailing Address:

FEI Number: 57-1176757

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RONZANI, ANGELA A
8895 FONTAINEBLUE BLVD., APT. 308
MIAMI, FL 33172 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: ELIZAGARAY, MARIA A
Address: 2655 COLLINS AVE., APT. 810
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGR () Delete
Name: CBSE S.A.,
Address: MORENO 473
City-St-Zip: CAPITAL FEDERAL ARGENTINA,

Title: MGR () Delete
Name: RONZANI, ANGELA A
Address: 8895 FONTAINEBLEU BLVD., APT. 308
City-St-Zip: MIAMI, FL 33172

Title: MGR () Delete
Name: SOL ORGUERA, MARIA
Address: 2655 COLLINS AVE., APT. 810
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGR () Delete
Name: ELIZAGARAY-VALENTINI, MARIA I
Address: 8895 FONTAINEBLEAU BLVD., APT. 308
City-St-Zip: MIAMI, FL 33172

Title: MGR () Delete
Name: DEL SOCORRO CRUZ, BEATRIZ
Address: 11880 SW 183 ST.
City-St-Zip: MIAMI, FL 33177

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
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Address:
City-St-Zip:

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

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

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: MARIA ELIZAGARAY

MGR

02/27/2009

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