2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000014323

Address:

City-St-Zip:

Entity Name: CONSORCIO PROMOTING LATIN AMERICA, LLC

CALLE LOS LABORATORIOS, ED. OFINCA, P4

CARACAS, VENEZUELA, DF 1030

FILED Dec 19, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
9050 PINES BLVD. SUITE 415 PEMBROKE PINES, FL 33024		2000 NW 89TH PL SUITE 122 MIAMI, FL 33172		
Current Mailing Address:		New Mailing Address:		
9050 PINES BLVD. SUITE 415 PEMBROKE PINES, FL 33024		2000 NW 89TH PL SUITE 122 MIAMI, FL 33172		
FEI Number	:: 56-2527053 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:		
	ENNIO VERA RD. , FL 33326 US			
	e named entity submits this statement for the eof Florida.	purpose of changing its registere	ed office or registered agent, or both	
SIGNATU	RE: ENNIO BUSTOS			
	Electronic Signature of Registered Ag	ent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGR () Delete BUSTOS, ENNIO 482 TALAVERA RD WESTON, FL 33326	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGR () Delete DE FREITAS, ANTHONY CALLE LOS LABORATORIOS, ED. OFINCA, P4 CARACAS, VENEZUELA, DF 1030	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGR () Delete DE FREITAS, IVEL CALLE LOS LABORATORIOS, ED. OFINCA, P4 CARACAS, VENEZUELA, DF 1030	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGR () Delete MATHEUS, FRANCISCO	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: ENNIO BUSTOS MGR 12/19/2007