

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000016404

Entity Name: E.N.D. STEVIA LLC

FILED
Jul 31, 2009
Secretary of State

Current Principal Place of Business:

ACHUMANI COMPLEJO AV. THE STRONGAS T126
MULTICENTRO ARIZONA T3
LA PAS, XX BOLIVA XX

New Principal Place of Business:

ACHUMANI COMPLEJO AV. THE STRONGAS T126
MULTICENTRO ARIZONA T3
LA PAZ, XX BOLIVIA XX

Current Mailing Address:

ACHUMANI COMPLEJO AV. THE STRONGAS T126
MULTICENTRO ARIZONA T3 MULTICENTRO ARIZONA
LA PAS, XX BOLIVA XX

New Mailing Address:

7925 SW 97TH STREET
MIAMI, FL 33156

FEI Number: 75-3266550 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FELDMAN, BENNETT G
2655 LEJEUNE RD
514
CORAL GABLES, FL 33134 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: MGRM () Delete
Name: VARGAS, MIRTA
Address: ACHUMANI COMPLEJO AV. STRONGAS T126
City-St-Zip: LA PAS, XX BOLIVA XX

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: VARGAS, MIRTA
Address: ACHUMANI COMPLEJO AV. STRONGAS T126
City-St-Zip: LA PAZ, XX BOLIVIA XX

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: MIRTA VARGAS

MGRM

07/31/2009

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