## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 25, 2005 08:00 AM Secretary of State

ANNUAL REPORT				Apr 25, 2005 08:00	
DOCUMENT # L9900004212				Se	cretary of Stat
ITERA IN	TERNATIONAL ENERGY, I	L.L.C.			
28 OCTOBER	DDLE EAST CENTRE 313	Mailing Address  9995 GATE PARKWAY SUITE 400 JACKSONVILLE, FL 32246	US		NOT NATE AND A STATE THAT THE STATE OF
DO NOT WRITE IN THIS SPACE			CE	01112005 No Chg-LLC	CR2E083 (10/03)
			a	59-3378112  5. Certificate of Status Desired	Not Applicable  \$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent					
9995 GATI SUITE 400	R, STEVEN C E PARKWAY ) VILLE, FL 32246	- - -	-	DO NOT WE	
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					
	tions of registered agent.				
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE, Registe	red Agent signature required	when reinstating)	DATE
Fi D	iling Fee is \$50.00 ue by May 1, 2005				
9.	MANAGING MEMBE	RS/MANAGERS	5-1		
TITLE NAME SYREET ADDRESS CITY-51-ZIP	MGR ITERA MANAGEMENT LTD. 199 ARCH MAKARIOS III AVENI LIMASSOL, CYPRUS, CY 3508				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				U000003 84/25/05-8	229230 30104-021 <b>50.0</b> 0
TITLE NAME STREET ADORESS CITY+ST-ZIP				DO NOT WI	RITE
TITLE NAME STREET ADDRESS CITY+ST+ZIP				IN THIS SPA	ACE
TITLE NAME STREET ADDRESS CITY-SI-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP			, <u> </u>		
11. I hereby of indicated limited lia	certify that the information supplied with a on this report is true and accurate and ability company or the receiver or truste	this filing does not qualify for the ex- that my arghature shall have the sar a empowered to execute this report	emption stated in Se ne legal effect as it n as required by Chap	ection 119.07(3)(i), Florida Statutes. I funde under oath; that I am a managin ter 608, Florida Statutes.	inther certify that the information g member or manager of the

SIGNATURE: Steven C. Koegler, Sect.3/23/05 904-996-8800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date Desputing Proces