2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

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

DOCUMENT # L99000004212

1. Entity Name

ITERA INTERNATIONAL ENERGY, L.L.C.



Principal Place of Business

OMRANIA MIDDLE EAST CENTRE 313 28 OCTOBER AVENUE LIMASSOL, CYPRUS, CY 3105 Mailing Address

9995 GATE PARKWAY SUITE 400 JACKSONVILLE, FL 32246

US

FILED Mar 17, 2008 8:00 am Secretary of State

03-17-2008 90264 048 ***138.75

60015303



02252008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applied For
59-3378112		Not Applicable
5. Certificate of Status Desired	\$5.0	Additional

6. Name and Address of Current Registered Agent

FOSTER, DENNIS A 9995 GATE PARKWAY SUITE 400 JACKSONVILLE, FL 32246

SIGNATURE:

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of cha ons of registered agent.	anging its registered office or registered agent, or both, in the State of Florida	I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title it applicable.	(NOTE: Registered Agent signature required when reinstaling)	DATE
	NOW!!! FEE IS \$138.75 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS	****	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ITERA MANAGEMENT LTD. 199 ARCH MAKARIOS III AVENUE LIMASSOL, CYPRUS, CY 3608		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WE	RITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		in this spa	ACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby of indicated limited lia	certify that the information supplied with this filing does no on this report is true and accurate and that my signature bility company or he receiver or trustee empowered to ex-	of qualify for the exemptions contained in Chapter 119, Florida Statutes. I fu shall have the same legal effect as if made under oath; that I am a manag secute this report as required by Chapter 608, Florida Statutes.	rther certify that the information ging member or manager of the