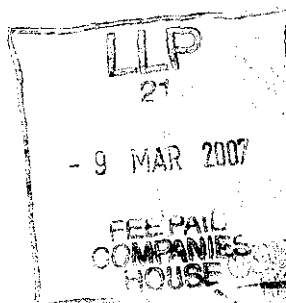


007305/30



Please complete in typescript,
or in bold black capitals.

CHWP000

**LLP363**

Annual Return of a Limited Liability Partnership

LLP Number Full Name of Limited Liability Partnership

Date of this return
The information in this return is made up to

Day Month Year

Date of next return
If you wish to make your next return on a date earlier than the anniversary of this return please show the date here.

Day Month Year

Registered Office
Any change of registered office must be notified on Form LLP287.

Show here the address as at the date of this return.

Post town County UK
Postcode

Register of Debenture Holders

If there is a register of debenture holders, or a duplicate of any such register or part of it, which is not kept at the registered office, state here where it is kept

Post town County UK
Postcode

List members on page 2

Certificate As a designated member I certify that the information given in this return is true to the best of my knowledge and belief.

Signed

Designated Member

Date

When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to Companies House

This return includes continuation sheets.
(enter number)



A43

31/03/2007

308

COMPANIES HOUSE
COMPANIES HOUSE

When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ

DX 33050 Cardiff

for partnerships registered in England and Wales

or

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

DX 235 Edinburgh

for partnerships registered in Scotland

or LP - 4 Edinburgh 2

SATURDAY

Members

* Please list members in alphabetical order

In the case of a member that is a corporation or a Scottish firm, the name is the corporate or firm name.

** Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.

☐

Details of new members must be notified on form LLP288a

Surname or Corporate Name	DA SILVA		
Forename(s)	JOSE MAURO		
Address **	R.MINISTRO GASTAO MESQUITA, 515- APTO 41 PERDIZES		
Post town	SAO PAULO		
County / Region		UK	
Country	BRAZIL	Postcode	
			Tick box if designated member <input checked="" type="checkbox"/>

Member Reference Number *(as advised by Companies House)

70779

Date of Birth

Day Month Year

15 09 1963

* Voluntary information

Members

Please list members in alphabetical order

In the case of a member that is a corporation or a Scottish firm, the name is the corporate or firm name.

** Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.

☐

Details of new members must be notified on form LLP288a

Surname or Corporate Name	MULTIREDE INTERNATIONAL LTDA.		
Forename(s)			
Address **	RUA DR EDUARDO DE SOUZAA ARANHA, No.387, 90 ANDAR		
	CONJUNTOS 91 E92, BAIRRO DO ITAIM BIBI		
Post town	SAO PAULO		
County / Region		UK	
Country	BRAZIL	Postcode	
			Tick box if designated member <input checked="" type="checkbox"/>

Member Reference Number *(as advised by Companies House)

44484

Date of Birth

Day Month Year

* Voluntary information