

SECURITIES AND EXCHANGE COMMISSION

FORM 3

Filing Date: **2013-01-10** | Period of Report: **2013-01-01**
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REPORTING OWNER

AVERHOFF ARMANDO

CIK: **1566231**

Type: **3** | Act: **34** | File No.: **000-25248** | Film No.: **13523195**

Mailing Address
6070 SW 13TH STREET
WEST MIAMI FL 33144

ISSUER

CONSOLIDATED WATER CO LTD

CIK: **928340** | IRS No.: **000000000** | State of Incorpor.: **E6** | Fiscal Year End: **1231**
SIC: **4941** Water supply

Mailing Address	Business Address
TRAFALGAR PLACE, WEST BAY ROAD, P.O. BOX GRAND CAYMAN, CAYMAN ISLANDS, BWI	TRAFALGAR PL WEST BAY RD GRAND CAYMAN BWI CAY E9 00000 8099474277

FORM 3

**UNITED STATES SECURITIES AND
EXCHANGE COMMISSION**
Washington, D.C. 20549

OMB APPROVAL	
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**INITIAL STATEMENT OF BENEFICIAL
OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person <u>AVERHOFF ARMANDO</u> (Last) (First) (Middle) <u>PO BOX 1114</u> (Street) <u>GRAND CAYMAN, E9 KY1-1102</u> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) <u>01/01/2013</u>	3. Issuer Name and Ticker or Trading Symbol <u>CONSOLIDATED WATER CO LTD [CWCO]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) ____ Director _____ 10% Owner <u>X</u> Officer (give title below) _____ Other (specify below) <u>Director of Information Tech</u>	5. If Amendment, Date Original Filed (Month/Day/Year)
		6. Individual or Joint/Group Filing (Check applicable line) <u>X</u> Form Filed by One Reporting Person ____ Form Filed by More than One Reporting Person	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
<u>Common Stock</u>	<u>0</u>	<u>D</u>	

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

Signatures

/s/ Armando Averhoff

** Signature of Reporting Person

01/10/2013

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.