FORM 3

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL								
OMB Number:	3235-0104							
Expires:	December 31, 2014							
Estimated average burden								
hours per response:	0.5							

1. Name and Address of Reporting Person*  TRELLEZ LUIS ARANGUREN		2. Date of Event Requiring Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol CORN PRODUCTS INTERNATIONAL INC [ CPO ]							
(Last)	(First)	(Middle)	05/21/2003			ionship of Reporting Perso all applicable)	( )		5. If Amendment, Date of Original Filed (Month/Day/Year)		
(Street)	(State)	(Zip)			X	Director Officer (give title below)	10% Owner Other (specify below)		6. Individual or Joint/Group Filing (Check Applicable Line)  X 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)					nt of Securities ally Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock					1,913,500	I		by Aratreco, S.A. de C.V. <sup>(1)</sup>			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable Expiration Date (Month/Day/Year)		ate	3. Title and Amount of Secur Underlying Derivative Securi				ersion (	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiration Date	Title		Amount or Number of Shares	Derivat Securit	ive	Direct (D) or Indirect (I) (Instr. 5)	

## **Explanation of Responses:**

1. Luis Aranguren-Trellez is not the sole owner of Aratreco, S.A. de C.V.

<u>Luis Aranguren-Trellez</u> <u>05/30/2003</u>

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 5 (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.