FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

| OMB APPROVAL | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|
| OMB Number: 3235-010 | | | | | | | |
| Estimated average burden | | | | | | | |
| hours per response: | 0.5 | | | | | | |

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

| Name and Address of Reporting Person* HYNES MARY ANN | | | 2. Date of Event Requiring Staten (Month/Day/Year 03/01/2006 | nent | 3. Issuer Name and Ticker or Trading Symbol CORN PRODUCTS INTERNATIONAL INC [CPO] | | | | | |
|--|---------|-------|---|--------------------------|---|---|--------------|--|--|--|
| (Last) (First) (Middle) 5 WESTBROOK CORPORATE CENTER | | ` ′ ′ | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | (Mo | 5. If Amendment, Date of Original Filed (Month/Day/Year) | | |
| | | | | | X Officer (give title below) | Other (spe | | idividual or Joint licable Line) | t/Group Filing (Check | |
| (Street) WESTCHE | STER IL | 60154 | | | Vice President and C | General Cou | 2 | _ | y One Reporting Person y More than One erson | |
| (City) | (State) | (Zip) | | | | | | | | |
| | | - | Гable I - Non | -Derivati | ive Securities Beneficia | ly Owned | | | | |
| 1. Title of Security (Instr. 4) | | | | 2. | . Amount of Securities | 3. Ownersh | ip 4. Na | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | |
| | , | | | | Beneficially Owned (Instr. 4) | Form: Direct (or Indirect ((Instr. 5) | t (D) (Insti | | , | |
| Common St | | | | | | Form: Direct (| t (D) (Insti | | · | |
| | | (e. | | Derivative | Beneficially Owned (Instr. 4) | Form: Direct or Indirect ((Instr. 5) | t (D) (Insti | :. 5) | · | |
| Common St | | | | Derivative ls, warran | 2,000 e Securities Beneficially nts, options, convertible | Form: Direct or Indirect ((Instr. 5) | t (D) (Insti | :. 5) | · | |

Explanation of Responses:

James J. Hirchak

03/14/2006

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ 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).