2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 16, 2008
Secretary of State

DOCUMENT# L01000015713

Entity Name: ONLINE DIRECTORIO, LLC

Current Principal Place of Business:

7105 SW 8TH ST., SUITE 206
MIAMI, FL 33144

New Principal Place of Business:

8051 W 24TH AVE
12
HIALEAH, FL 33016

Current Mailing Address:

P.O. BOX 830471
MIAMI, FL 33283

New Mailing Address:

FEI Number: 56-2327756 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAFONTS, MARITZA C
7105 SW 8TH ST., SUITE 206
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

SAFONTS, MARITZA C
8051 W 24TH AVE
12
HIALEAH, FL 33016 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MARITZA C. SAFONTS 01/16/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SAFONTS, MARITZA C
Address: 7105 SW 8TH ST., SUITE #206
City-St-Zip: MIAMI, FL 33144

Title: MGRM ( ) Delete
Name: SAFONTS, LUIS M
Address: 7105 SW 8TH ST, SUITE #206
City-St-Zip: MIAMI, FL 33144

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: SAFONTS, MARITZA C
Address: 8051 W 24TH AVE, # 12
City-St-Zip: HIALEAH, FL 33016

Title: MGRM (X) Change ( ) Addition
Name: SAFONTS, LUIS M
Address: 8051 W 24TH AVE, # 12
City-St-Zip: HIALEAH, FL 33016

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARITZA C. SAFONTS P 01/16/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date