2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L04000090684

ODESSA GROUP II, L.L.C.



Principal Place of Business

19 WEST FLAGLER STREET

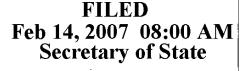
SUITE 310 MIAMI, FL 33130 US

Mailing Address

19 WEST FLAGLER STREET

SUITE 310

MIAMI, FL 33130 US





02082007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number	 Applied F	ог
20-2004175	Not Appli	cable
5. Certificate of Status Desired	\$5.00 Additional	

6. Name and Address of Current Registered Agent

FIORINI, DANTE M 19 WEST FLAGLER STREET **SUITE 310** MIAMI, FL 33130

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8.	. 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	I am familiar with, and accept
	the obligations of registered agent.	

SIGNATURE.

Signature, typed or printed name of registered agent and little if applicable.

Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FIORINI, DANTE M 19 WEST FLAGLER STREET, SUITE 310 MIAMI, FL 33130	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FIORINI, ODESSA W 19 WEST FLAGLER STREET, SUITE 310 MIAMI, FL 33130	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-SI-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

000000635866 02/23/07-80032-002 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

DANTE M. FIORIN), MANARINA MEMber