2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# L07000063197

Entity Name: ITALVEN INTERNATIONAL GROUP, LLC

Current Principal Place of Business:

506 SW 145TH TERRACE
THE SHOPS AT PEMBROKE GARDENS
PEMBROKE PINES, FL 33027

New Principal Place of Business:

Current Mailing Address:

506 SW 145TH TERRACE
THE SHOPS AT PEMBROKE GARDENS
PEMBROKE PINES, FL 33027

New Mailing Address:

FEI Number: 39-2060034 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DI BLASI, FRANCO
506 SW 145TH TERRACE
THE SHOPS AT PEMBROKE GARDENS
PEMBROKE PINES, FL 33027 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: DI BLASI, LEONARDO
Address: 2101 BRICKELL AVE.
City-St-Zip: MIAMI, FL 33129

Title: MGRM ( ) Delete
Name: DI BLASI, FRANCO
Address: 2101 BRICKELL AVE.
City-St-Zip: MIAMI, FL 33129

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: DI BLASI, LEONARDO
Address: 2101 BRICKELL AVE. #1707
City-St-Zip: MIAMI, FL 33129

Title: MGRM (X) Change ( ) Addition
Name: DI BLASI, FRANCO
Address: 2101 BRICKELL AVE. #1707
City-St-Zip: MIAMI, FL 33129

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: FRANCO DI BLASI MGRM 04/21/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date