

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004914

FILED
Jan 19, 2007
Secretary of State

Entity Name: ODLI, INC.

Current Principal Place of Business:

220 MIRACLE MILE
SUITE 213
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

220 MIRACLE MILE
SUITE 213
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 65-0863841

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATRIZIA, COCO
220 MIRACLE MILE
SUITE 213
CORAL GABLES, FL 33134 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

OFFICERS AND DIRECTORS:

Title: SD (X) Delete
Name: FOGLIA, MARINA
Address: 6917 SW 115 PL #B
City-St-Zip: MIAMI, FL 33173

Title: P () Delete
Name: COCO, PATRIZIA
Address: 8311 NW 201 ST
City-St-Zip: MIAMI, FL 33015

Title: T (X) Delete
Name: MOSCETTI, ANDREA
Address: 743 ANASTASIA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRIZIA COCO

P

01/19/2007

Electronic Signature of Signing Officer or Director

Date