2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 25, 2007
Secretary of State

DOCUMENT# P02000003595

Entity Name: VENALI, INC.

Current Principal Place of Business:

ONE ALHAMBRA PLAZA STE 800
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

ONE ALHAMBRA PLAZA STE 800
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 26-0029617 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
STE. 250
PLANTATION, FL 33324 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:	D	( ) Delete
Name:	JUNIOR, WALTHER	
Address:	ONE ALHAMBRA PLAZA, SUITE 800	
City-St-Zip:	CORAL GABLES, FL 33134 US	
Title:	D	( ) Delete
Name:	TOSCHEK, MARK	
Address:	ONE ALHAMBRA PLAZA, SUITE 800	
City-St-Zip:	CORAL GABLES, FL 33134 US	
Title:	D	( ) Delete
Name:	RASENBERGER, PETER	
Address:	ONE ALHAMBRA PLAZA, SUITE 800	
City-St-Zip:	CORAL GABLES, FL 33134 US	
Title:	CEO	( ) Delete
Name:	JOHN, PONCY	
Address:	ONE ALHAMBRA PLAZA, SUITE 800	
City-St-Zip:	CORAL GABLES, FL 33134 US	
Title:	CFO	(X) Delete
Name:	PERALTA, ARIEL	
Address:	ONE ALHAMBRA PLAZA, SUITE 800	
City-St-Zip:	CORAL GABLES, FL 33134	
Title:	S	(X) Delete
Name:	O'KEEFE, DOUGLAS L	
Address:	ONE ALHAMBRA PLAZA, SUITE 800	
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:	
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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN PONCY CEO 07/25/2007

Electronic Signature of Signing Officer or Director — Date