2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000003595

Entity Name: VENALI, INC.

Apr 29, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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ONE ALHAMBRA PLAZA STE 800 6100 BLUE LAGOON DR. CORAL GABLES, FL 33134

250

MIAMI, FL 33126

Current Mailing Address: New Mailing Address:

ONE ALHAMBRA PLAZA STE 800 6100 BLUE LAGOON DR. CORAL GABLES, FL 33134 US

MIAMI, FL 33126 US

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. STE. 250 PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

JUNIOR, WALTHER JUNIOR, WALTHER Name: Name:

ONE ALHAMBRA PLAZA, SUITE 800 6100 BLUE LAGOON DR., SUITE 250 Address: Address:

City-St-Zip: CORAL GABLES, FL 33134 US City-St-Zip: MIAMI, FL 33126 US

Title: Title: () Delete (X) Change () Addition

TOSCHEK, MARK Name: TOSCHEK, MARK Name:

ONE ALHAMBRA PLAZA, SUITE 800 6100 BLUE LAGOON DR., SUITE 250 Address: Address:

CORAL GABLES, FL 33134 US MIAMI, FL 33126 US City-St-Zip: City-St-Zip:

Title: (X) Change () Addition () Delete Title: Name: Name:

RASENBERGER, PETER RASENBERGER, PETER ONE ALHAMBRA PLAZA, SUITE 800 6100 BLUE LAGOON DR., SUITE 250 Address: Address:

CORAL GABLES, FL 33134 US City-St-Zip: MIAMI, FL 33126 US

City-St-Zip:

Title: CEO () Delete Title: CEO (X) Change () Addition JOHN, PONCY JOHN, PONCY Name: Name:

Address: ONE ALHAMBRA PLAZA, SUITE 800 Address: 6100 BLUE LAGOON DR., SUITE 250

City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134 US MIAMI, FL 33126 US

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 04/29/2008