

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000093620

Entity Name: VENISE, INC.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

100 NORTH BISCAYNE BLVD
SUITE 500
MIAMI, FL 33132

New Principal Place of Business:

Current Mailing Address:

100 NORTH BISCAYNE BLVD
SUITE 500
MIAMI, FL 33132

New Mailing Address:

FEI Number: 55-0797092 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MOYAL, PATRICK
208 N UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: VOLPE, MASSIMO
Address: 100 NORTH BISCAYNE BLVD SUITE 500
City-St-Zip: MIAMI, FL 33132

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, D (X) Change () Addition
Name: VOLPE, MASSIMO
Address: 100 NORTH BISCAYNE BLVD SUITE 500
City-St-Zip: MIAMI, FL 33132

Title: VP () Change (X) Addition
Name: BARTHE, FREDERIC M
Address: 100 NORTH BISCAYNE BLVD-SUITE 500
City-St-Zip: MIAMI, FL 33132

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FREDERIC BARTHE

VP

04/28/2006

Electronic Signature of Signing Officer or Director

Date