2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 16, 2009
Secretary of State

DOCUMENT# P96000047155

Entity Name: ODEVELOPER, INC.

Current Principal Place of Business:

2225 N COMMERCE PKWY
SUITE 6
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

2225 N COMMERCE PKWY
SUITE 6
WESTON, FL 33326

New Mailing Address:

FEI Number: 65-0668499 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MESA, MANUEL A
1313 SW 1ST STREET
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

MESA, MANUEL A
2441 NW 93 AV
SUITE 101
MIAMI, FL 33172 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: MM 10/16/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PALM, TIRSO R
Address: 2225 N COMMERCE PKWY SUITE 6
City-St-Zip: WESTON, FL 33326

Title: P ( ) Delete
Name: PALM, GUILLERMO A
Address: 2225 N COMMERCE PKWY SUITE 6
City-St-Zip: WESTON, FL 33326

Title: D ( ) Delete
Name: RUBIO, ALBERTO J
Address: 2225 N COMMERCE PKWY SUITE 6
City-St-Zip: WESTON, FL 33326

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 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: GUILLERMO PALM P 10/16/2009
Electronic Signature of Signing Officer or Director Date