

**2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000001002

**Entity Name:** OD INTERNATIONAL, INC.**Current Principal Place of Business:**6600 NORTH MILITARY TRAIL  
BOCA RATON, FL 33496**Current Mailing Address:**6600 NORTH MILITARY TRAIL  
BOCA RATON, FL 33496 US**FEI Number:** 65-0323334**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SMITH, GERRY P.  
Address        6600 NORTH MILITARY TRAIL  
City-State-Zip: BOCA RATON FL 33496

Title            VICE PRESIDENT AND SECRETARY  
Name            HLAVINKA, SARAH E.  
Address        6600 NORTH MILITARY TRAIL  
City-State-Zip: BOCA RATON FL 33496

Title            ASSISTANT SECRETARY  
Name            TRINLEY, ALICIA  
Address        6600 NORTH MILITARY TRAIL  
City-State-Zip: BOCA RATON FL 33496

Title            VICE PRESIDENT AND CO-CHIEF  
                 FINANCIAL OFFICER  
Name            HOOD, MAX  
Address        6600 NORTH MILITARY TRAIL  
City-State-Zip: BOCA RATON FL 33496

Title            DIRECTOR  
Name            HLAVINKA, SARAH E.  
Address        6600 NORTH MILITARY TRAIL  
City-State-Zip: BOCA RATON FL 33496

Title            VP  
Name            AVANT, ROBERT G.  
Address        6600 NORTH MILITARY TRAIL  
City-State-Zip: BOCA RATON FL 33496

Title            ASSISTANT SECRETARY  
Name            SATYAL, DEBBIE  
Address        6600 NORTH MILITARY TRAIL  
City-State-Zip: BOCA RATON FL 33496

Title            VICE PRESIDENT AND CO-CHIEF  
                 FINANCIAL OFFICER  
Name            HAGGARD, ADAM  
Address        6600 NORTH MILITARY TRAIL  
City-State-Zip: BOCA RATON FL 33496

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*I hereby 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 all other like empowered.*

**SIGNATURE:** DEBBIE SATYAL**ASSISTANT SECRETARY    03/20/2025**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name HAGGARD, ADAM  
Address 6600 NORTH MILITARY TRAIL  
City-State-Zip: BOCA RATON FL 33496

Title DIRECTOR  
Name HOOD, MAX  
Address 6600 NORTH MILITARY TRAIL  
City-State-Zip: BOCA RATON FL 33496