

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000000359

FILED  
Apr 25, 2007  
Secretary of State

Entity Name: VOZZCOM, INC.

## Current Principal Place of Business:

10100 W. SAMPLE ROAD  
403  
CORAL SPRINGS, FL 33065

## New Principal Place of Business:

11768 W. SAMPLE ROAD  
CORAL SPRINGS, FL 33065

## Current Mailing Address:

10100 W. SAMPLE ROAD  
403  
CORAL SPRINGS, FL 33065

## New Mailing Address:

11768 W. SAMPLE ROAD  
CORAL SPRINGS, FL 33065

FEI Number: 65-1069712

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

VOZZOLA, DOREEN  
10100 W. SAMPLE ROAD  
SUITE 403  
CORAL SPRINGS, FL 33065 US

## Name and Address of New Registered Agent:

VOZZOLA, DOREEN  
11768 W. SAMPLE ROAD  
CORAL SPRINGS, FL 33065 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: \_\_\_\_\_

04/25/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: VOZZOLA, DOREEN  
Address: 10100 W. SAMPLE ROAD #403  
City-St-Zip: CORAL SPRINGS, FL 33065

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: VOZZOLA, DOREEN  
Address: 11768 W. SAMPLE ROAD  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VST ( ) Change (X) Addition  
Name: VOZZOLA, DAVID E  
Address: 11768 W. SAMPLE ROAD  
City-St-Zip: CORAL SPRINGS, FL 33065

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: DAVID E. VOZZOLA

VST

04/25/2007

Electronic Signature of Signing Officer or Director

Date