

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000032878

Entity Name: VERBATIM LANGUAGES, INC.

FILED
Apr 14, 2006
Secretary of State

Current Principal Place of Business:

2645 CEDAR BLUFF LANE
OCOE, FL 34761

New Principal Place of Business:

Current Mailing Address:

2645 CEDAR BLUFF LANE
OCOE, FL 34761

New Mailing Address:

FEI Number: 20-2450177

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGUIRRE, MYRNA
2645 CEDAR BLUFF LANE
OCOE, FL 34761 US

Name and Address of New Registered Agent:

WAGENKNECHT, VANESSA C
7709 APPLE TREE CIRCLE
ORLANDO, FL 32819 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: VANESSA C. WAGENKNECHT

04/14/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSEC () Delete
Name: AGUIRRE, MYRNA
Address: 2645 CEDAR BLUFF LANE
City-St-Zip: OCOE, FL 34761

Title: VPTR () Delete
Name: WAGENKNECHT, VANESSA
Address: 7709 APPLE TREE CIRCLE
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: VANESSA C. WAGENKNECHT

MS.

04/14/2006

Electronic Signature of Signing Officer or Director

Date