

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90030 021 ***150.00

DOCUMENT # P99000022758

1. Entity Name
VOICE PLUS, INC.

Principal Place of Business 12515 NORTH KENDALL DRIVE SUITE 200 MIAMI FL 33186	Mailing Address 12515 NORTH KENDALL DRIVE SUITE 200 MIAMI FL 33186-1830
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 65-0908728	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
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Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
ROMANIK, DAVID S
20170 PINES BLVD.
SUITE 302
PEMBROKE PINES FL 33029

7. Name and Address of New Registered Agent
 Name **DR. STEVE KRINGOLD**
 Street Address (P.O. Box Number is Not Acceptable)
12515 N. KENDALL DR #200
 City **MIAMI** FL Zip Code **33186**

8. 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 Steve Kringold DATE 4/20/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME D ROMANIK, DAVID S STREET ADDRESS 12515 NORTH KENDALL DRIVE CITY-ST-ZIP MIAMI FL 33186	<input checked="" type="checkbox"/> Delete	TITLE NAME D DAVID SLACHTER STREET ADDRESS 12515 N. KENDALL DR #200 CITY-ST-ZIP MIAMI, FL 33186	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME C HY ASH STREET ADDRESS 12515 N. KENDALL DR #200 CITY-ST-ZIP MIAMI, FL 33186	<input type="checkbox"/> Delete	TITLE NAME C ROLF RUDESTAM STREET ADDRESS 12515 N. KENDALL DR #200 CITY-ST-ZIP MIAMI, FL 33186	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME C/OO/D STUART SUTTA STREET ADDRESS 12515 N. KENDALL DR #200 CITY-ST-ZIP MIAMI, FL 33186	<input type="checkbox"/> Delete	TITLE NAME C/OO/D STEVE KRINGOLD STREET ADDRESS 12515 N. KENDALL DR #200 CITY-ST-ZIP MIAMI, FL 33186	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME D BRAD BELLUM STREET ADDRESS 12515 N. KENDALL DR #200 CITY-ST-ZIP MIAMI FL 33186	<input type="checkbox"/> Delete	TITLE NAME D BRAD BELLUM STREET ADDRESS 12515 N. KENDALL DR #200 CITY-ST-ZIP MIAMI FL 33186	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Stuart Sutta Date 4-20-00 Daytime Phone # 305-412-8217
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)

8990000028758

Attachment
729457

#12. Additions/Changes to Officers and Directors in 11.

Title	D	Addition
Name	William Spiro	
Street Address	277 Park	
City - St - Zip	New York, NY 10172	