

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000111857

Entity Name: VOE SOLUTIONS, INC.**Current Principal Place of Business:**1911 MOTANA AVE NORTHEAST
SAINT PETERSBURG, FL 33703**Current Mailing Address:**1911 MOTANA AVE NORTHEAST
SAINT PETERSBURG, FL 33703**FEI Number:** 51-0551819**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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 | DP |
| Name | OWEN, STEVEN W |
| Address | 1911 MOTANA AVE NORTHEAST |
| City-State-Zip: | SAINT PETERSBURG FL 33703 |

| | |
|-----------------|---------------------------|
| Title | DV |
| Name | GABER, ROY G |
| Address | 1911 MOTANA AVE NORTHEAST |
| City-State-Zip: | SAINT PETERSBURG FL 33703 |

| | |
|-----------------|---------------------------|
| Title | D |
| Name | REESE, DARRYL M |
| Address | 1911 MOTANA AVE NORTHEAST |
| City-State-Zip: | SAINT PETERSBURG FL 33703 |

| | |
|-----------------|---------------------------|
| Title | S |
| Name | VANCE, AMINTA |
| Address | 1911 MOTANA AVE NORTHEAST |
| City-State-Zip: | SAINT PETERSBURG FL 33703 |

| | |
|-----------------|---------------------------|
| Title | T |
| Name | REESE, YOLONDA |
| Address | 1911 MOTANA AVE NORTHEAST |
| City-State-Zip: | SAINT PETERSBURG FL 33703 |

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: DARRYL M. REESE**DIRECTOR****02/18/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date