

2006 FOR PROFIT CORPORATION
REINSTATEMENT

DOCUMENT # F01000001611					
1. Entity Name VOCE INTERNATIONAL GROUP OF COMPANIES INC.					
Principal Place of Business 1925 N.E. 45TH STE 234 FT LAUDERDALE, FL 33308			Mailing Address 1925 N.E. 45TH STE 234 FT LAUDERDALE, FL 33308		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 54-2308716	
				Applied For Not Applicable	
6. Name and Address of Current Registered Agent VOCE, ALLAN G 1925 N.E. 45TH ST., STE 234 FT LAUDERDALE, FL 33308				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
7. Name and Address of New Registered Agent				01272006 REIN-P CR2E098 (11/05)	
Name					
Street Address (P.O. Box Number is Not Acceptable)					
City				FL Zip Code	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>[Signature]</i>				DATE <i>Feb 20/06</i>	
FILE NOW!!! FEE IS \$300.00				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PTCD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	VOCE, ALLAN S		NAME		
STREET ADDRESS	1925 N.E. 45TH STREET, STE 234		STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE, FL		CITY-ST-ZIP		
TITLE	SD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	VOCE, MICHAEL C		NAME		
STREET ADDRESS	1925 N.E. 45TH STREET, STE 234		STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE, FL		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE <i>[Signature]</i>				DATE <i>Feb 20/06</i>	
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				DATE	

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 FEB -3 PM 3:24

REINSTATEMENT 05-06

01272006 REIN-P CR2E098 (11/05)

4. FEI Number
54-2308716Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VOCE, ALLAN G
1925 N.E. 45TH ST., STE 234
FT LAUDERDALE, FL 33308

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTCD
VOCE, ALLAN S
1925 N.E. 45TH STREET, STE 234
FT LAUDERDALE, FL☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
VOCE, MICHAEL C
1925 N.E. 45TH STREET, STE 234
FT LAUDERDALE, FL☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIP
500065564895
02/10/06--01012--022 ***300.00☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DATE