


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 15, 2005 8:00 am**  
**Secretary of State**

08-15-2005 90079 014 \*\*\*150.00

<b>DOCUMENT # F02000002622</b>	
1. Entity Name <b>VOICE PRINT INTERNATIONAL, INC.</b>	

Principal Place of Business <b>975 FLYNN ROAD CAMARILLO, CA 93012</b>	Mailing Address <b>975 FLYNN ROAD CAMARILLO, CA 93012</b>
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



06302005 Chg-P CR2E034 (10/03)

4. FEI Number <b>77-0496949</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent <b>TOOMEPUU, VELLO 3396 WYOMING CIR. TAMPA, FL 33611</b>	
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7. Name and Address of New Registered Agent	
Name <b>INCORP SERVICES INC.</b>	
Street Address (P.O. Box Number is Not Acceptable) <b>18450 NE 2ND AVE</b>	
City <b>MIAMI</b>	FL Zip Code <b>33179</b>

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 *Karmen Flavin* **KARMEN FLAVIN - Client Services Rep.** DATE **July 28, 2005**  
*on behalf of Incorp Services, Inc.* (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP SILVERS, GENE 975 FLYNN RD. CAMARILLO, CA 93012 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCVP MARSH, ANDREW 975 FLYNN RD. CAMARILLO, CA 93012 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP MARSH, ANDREW 975 FLYNN RD CAMARILLO, CA 93012 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SILVERS, KATHLENE 975 FLYNN RD. CAMARILLO, CA 93012 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MARSH, ANDREW 975 FLYNN RD. CAMARILLO, CA 93012 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MARSH, BRENDA L. 975 FLYNN RD. CAMARILLO, CA 93012 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **7/25/05** **805-389-5200**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

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VOICE PRINT INTERNATIONAL, INC.



Principal Place of Business  
975 FLYNN ROAD  
CAMARILLO, CA 93012

Mailing Address  
975 FLYNN ROAD  
CAMARILLO, CA 93012

ATTACHMENT  
50061537

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

06302005 Chg-P CR2E034 (10/03)

City & State

City & State

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Applied For  
Not Applicable

Zip

Country

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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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7. Name and Address of New Registered Agent

TOOMEPUU, VELLO  
3396 WYOMING CIR.  
TAMPA, FL 33611

Name INCORP SERVICES INC.

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

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City MIAMI

FL

Zip Code 33179

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00  
Due by September 7, 2005

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

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 CP  
NAME SILVERS, GENE ☒ Delete  
STREET ADDRESS 975 FLYNN RD.  
CITY-ST-ZIP CAMARILLO, CA 93012

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VCP  
NAME MARSH, ANDREW ☐ Delete  
STREET ADDRESS 975 FLYNN RD.  
CITY-ST-ZIP CAMARILLO, CA 93012

TITLE CP ☒ Change ☐ Addition  
NAME MARSH, ANDREW  
STREET ADDRESS 975 FLYNN RD.  
CITY-ST-ZIP CAMARILLO, CA 93012

TITLE S ☒ Delete  
NAME SILVERS, KATHLENE  
STREET ADDRESS 975 FLYNN RD.  
CITY-ST-ZIP CAMARILLO, CA 93012

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☐ Delete  
NAME MARSH, ANDREW  
STREET ADDRESS 975 FLYNN RD.  
CITY-ST-ZIP CAMARILLO, CA 93012

TITLE ☐ Change ☐ Addition  
NAME  
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CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Change ☒ Addition  
NAME MARSH, BRENDA L.  
STREET ADDRESS 975 FLYNN RD.  
CITY-ST-ZIP CAMARILLO, CA 93012

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/25/05

Date

805-389-5200

Daytime Phone #