

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001375

FILED
Aug 28, 2008
Secretary of State

Entity Name: LATIN AMERICAN VOIP INC.

Current Principal Place of Business:

7801 NW 37TH STREET
SUITE 5030
DORAL, FL 33166

New Principal Place of Business:

Current Mailing Address:

VIPSAL #5030
PO BOX 025364
MIAMI, FL 33102

New Mailing Address:

FEI Number: 20-1845712

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEOUGH, GREG
7801 NW 37TH STREET
SUITE 5030
DORAL, FL 33166 US

Name and Address of New Registered Agent:

GRANER & HEIMOVICS, P.A.
399 W. PALMETTO PARK ROAD
SUITE 100
BOCA RATON, FL 33432 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: JOE HEIMOVICS

08/28/2008

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: KEOUGH, GREGORY
Address: 15144 NEW QUAY COURT
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: NUNEZ, WILLIAM
Address: 7801 NW 37TH STREET
City-St-Zip: DORAL, FL 33166

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM NUNEZ

CP

08/28/2008

Electronic Signature of Signing Officer or Director

Date