## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000006520

Entity Name: TUVOX INCORPORATED

KOSHLAND, JAMES

2000 UNIVERSITY AVENUE

EAST PALO ALTO, CA 94303

Name: Address:

City-St-Zip:

FILED Apr 13, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1141 S ROGERS CIRCLE STE 9 6401 CONGRESS BOCA RATON, FL 33487 SUITE 215 BOCA RATON, FL 33487 **Current Mailing Address: New Mailing Address:** 19050 PRUNERIDGE AVENUE STE 150 19050 PRUNERIDGE AVENUE CUPERTINO, CA 95014 SUITE 150 CUPERTINO, CA 95014 FEI Number: 77-0563871 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BALL, TIMOTHY BALL, TIMOTHY 6401 CONGRESS 1141 S ROGERS CIRCLE STE 9 BOCA RATON, FL 33487 SUITE 215 BOCA RATON, FL 33487 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: 04/13/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition MILLER, LARRY S Name: Name: 19050 PRUNERIDGE AVE STE 150 Address: Address: City-St-Zip: CUPERTINO, CA 95014 City-St-Zip: ( ) Delete Title: Title: () Change () Addition Name: POLLOCK, STEVEN S Name: 19050 PRUNERIDGE AVE STE 150 Address: Address: CUPERTINO, CA 95014 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition MCCARTHY, JOSEPH D Name: Name: 19050 PRUNERIDGE AVE STE 150 Address: Address: City-St-Zip: CUPERTINO, CA 95014 City-St-Zip: Title: ( ) Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: JOSEPH D. MCCARTHY VP 04/13/2006