

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000423

Entity Name: VOODOOVOX, INC.

FILED
Jan 26, 2011
Secretary of State

Current Principal Place of Business:

1321 MASS MOCA WAY
NORTH ADAMS, MA 01247

New Principal Place of Business:

63 SPRING STREET, SUITE 401
WILLIAMSTOWN, MA 01267

Current Mailing Address:

1321 MASS MOCA WAY
NORTH ADAMS, MA 01247

New Mailing Address:

63 SPRING STREET, SUITE 401
WILLIAMSTOWN, MA 01267

FEI Number: 04-3527580

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH LTD., INC.
515 EAST PARK AVE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PTSD
Name: HAMILTON, J. SCOTT
Address: 17 PORTER STREET
City-St-Zip: WILLIAMSTOWN, MA 01267

Title: D
Name: PEABODY, WILLIAM S
Address: 476 MASSACHUSETTS AVE SUITE A
City-St-Zip: NORTH ADAMS, MA 01267

Title: D
Name: PATRICO, ALAN
Address: 445 PARK AVE
City-St-Zip: NEW YORK, NY 10022

Title: D
Name: MURRAY, STEVEN
Address: C/O SOFTBANK, 1188 CENTRE STREET
City-St-Zip: NEWTON CENTER, MA 02459

Title: D
Name: MIN, DAVID
Address: 3601 WEST OLIVE AVE SUITE 501
City-St-Zip: BURBANK, CA 91505

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: J. SCOTT HAMILTON

PTSD

01/26/2011

Electronic Signature of Signing Officer or Director

Date