

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000048644

FILED
Apr 29, 2008
Secretary of State

Entity Name: VOIP SERVICES, INC.

Current Principal Place of Business:

1000 BRICKELL AVENUE
SUITE 1020
MIAMI, FL 33131

New Principal Place of Business:

1000 BRICKELL AVENUE
SUITE 200
MIAMI, FL 33131

Current Mailing Address:

1000 BRICKELL AVENUE
SUITE 1020
MIAMI, FL 33131

New Mailing Address:

1000 BRICKELL AVENUE
SUITE 200
MIAMI, FL 33131

FEI Number: 65-1009010

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICARDO BAJANDAS, PA
1000 BRICKELL AVENUE
SUITE 1020
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

RICARDO BAJANDAS, PA
1000 BRICKELL AVENUE
SUITE 200
MIAMI, FL 33131 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: RICARDO BAJANDAS

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHAVEZ, SABINO M
Address: 1000 BRICKELL AVENUE SUITE 1020
City-St-Zip: MIAMI, FL 33131

Title: AS () Delete
Name: BAJANDAS, RICARDO
Address: 1000 BRICKELL AVENUE, SUITE 1020
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CHAVEZ, SABINO M
Address: 1000 BRICKELL AVENUE SUITE 200
City-St-Zip: MIAMI, FL 33131

Title: AS (X) Change () Addition
Name: BAJANDAS, RICARDO
Address: 1000 BRICKELL AVENUE, SUITE 200
City-St-Zip: MIAMI, FL 33131

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: SABINO M. CHAVEZ

PD

04/29/2008

Electronic Signature of Signing Officer or Director

Date