

FILED
Apr 04, 2003 8:00 am
Secretary of State

04-04-2003 90110 012 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # <u>P00000060338</u>			
1. Entity Name <u>Voices Enterprises, INC</u>			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business <u>4303 Greenbrier Lane</u>		3. Mailing Address <u>Same</u>	
State, Apt. #, etc. <u>Weston - FL</u>		State, Apt. #, etc. <u>Same</u>	
City & State <u>Weston - FL</u>		City & State <u>Weston - FL</u>	
Zip <u>33331</u>		Country <u>USA</u>	
4. FEI Number <u>65-1024840</u>		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent			
Name <u>Andrae Otoy</u>			
Street Address (P.O. Box Number is Not Acceptable) <u>4303 Greenbrier Lane</u>			
City <u>Weston</u>			
State <u>FL</u>			
Zip Code <u>33331</u>			
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 _____ (NOTE: Registered Agent signature required when registering)			
9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE <u>Pres</u>	NAME <u>Andrae Otoy</u>	TITLE <u>Pres</u>	NAME <u>Andrae Otoy</u>
STREET ADDRESS <u>4303 Greenbrier Lane</u>	CITY- ST- ZIP <u>Weston - FL 33331</u>	STREET ADDRESS <u>4303 Greenbrier Lane</u>	CITY- ST- ZIP <u>Weston - FL 33331</u>
TITLE <u>Pres</u>	NAME <u>Andrae Otoy</u>	TITLE <u>Pres</u>	NAME <u>Andrae Otoy</u>
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DO NOT WRITE IN THIS SPACE			
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 on an attachment with an address, with all other like employees.			
SIGNATURE: <u>X Andrae Otoy</u>		DATE: <u>4-2-03</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR <u>Andrae Otoy</u>		DATE <u>4-2-03</u>	