

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000100182

Entity Name: VTECH, INC.

FILED
Jun 17, 2008
Secretary of State

Current Principal Place of Business:

542 HASSOCKS LP
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 952128
LAKE MARY, FL 327952128

New Mailing Address:

FEI Number: 59-3680700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUFFY, MATTHEW S
26430 PALMETTO CIR
PAISLEY, FL 32767 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: PD () Delete
Name: DUFFY, MATTHEW S
Address: 26430 PALMETTO CIR
City-St-Zip: PAISLEY, FL 32767

Title: ST () Delete
Name: DUFFY, ERIN M
Address: 4181 LEAFY GLADE PLACE
City-St-Zip: CASSELBERRY, FL 32707

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: DUFFY, DENNIS M
Address: 542 HASSOCKS LOOP
City-St-Zip: LAKE MARY, FL 32746

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: ERIN M. DUFFY

ST

06/17/2008

Electronic Signature of Signing Officer or Director

Date