2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000014280

Entity Name: VOX CONSULTING GROUP, INC.

FILED Apr 30, 2007 Secretary of State

Current Princip	al Place of Business:	New Princip	al Place of Business

12330 SW 53RD STREET 151 S. WYMORE ROAD

SUITE 712 SUITE 3000

FORT LAUDERDALE, FL 33330 ALTAMONTE SPRINGS, FL 32714

Current Mailing Address: New Mailing Address:

151 S. WYMORE ROAD SUITE 3000 12330 SW 53RD STREET

SUITE 712

ALTAMONTE SPRINGS, FL 32714 FORT LAUDERDALE, FL 33330

FEI Number: 03-0437108 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

ADLER, MICHAEL B LEWIS, SHAWN 12330 SW 53RD ST 151 S. WYMORE ROAD

SUITE 3000 SUITE 712 FORT LAUDERDALE, FL 33330 US ALTAMONTE SPRINGS, FL 32714 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: SHAWN LEWIS 04/30/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCEO () Delete Title: (X) Change () Addition

ADLER, MICHAEL B CATALDO, TONY Name: Name:

12330 SW 53RD ST SUITE 712 151 S. WYMORE ROAD, SUITE 3000 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33330 City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: () Delete Title: () Change (X) Addition

Name: Name: STAATS, BOB

Address: 151 S. WYMORE ROAD, SUITE 3000 Address: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: City-St-Zip:

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: BOB STAATS 04/30/2007 S