

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000003321

Entity Name: Z FONE VOIP CORP.

FILED  
May 03, 2005  
Secretary of State

## Current Principal Place of Business:

P.O. BOX 622264  
OVIEDO, FL 32762

## New Principal Place of Business:

250 WILSHIRE BLVD  
114  
CASSELBERRY, FL 32707

## Current Mailing Address:

P.O. BOX 622264  
OVIEDO, FL 32762

## New Mailing Address:

250 WILSHIRE BLVD  
114  
CASSLEBERRY, FL 32707

FEI Number: 20-0488131

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CERRUD, EURIBIADES II  
100 S ORANGE AVE 2 FLOOR  
ORLANDO, FL 32801 US

## Name and Address of New Registered Agent:

CERRUD, EURIBIADES II  
P.O. BOX 622264  
OVIEDO, FL 32801 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: EURIBIASDES CERRUD

05/03/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LOPEZ, DARREL  
Address: 1015 S MAGEE CT  
City-St-Zip: OVIEDO, FL 32765

Title: T ( ) Delete  
Name: LOPEZ, PATRICIA D  
Address: 1015 S MAGEE CT  
City-St-Zip: OVIEDO, FL 32765

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LOPEZ, DARRELL  
Address: P.O. BOX 622264  
City-St-Zip: OVIEDO, FL 32765

Title: S (X) Change ( ) Addition  
Name: PATRICIA, LOPEZ  
Address: P.O. BOX 622264  
City-St-Zip: OVIEDO, FL 32765

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DARRELL LOPEZ

P

05/03/2005

Electronic Signature of Signing Officer or Director

Date