

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000142744

Entity Name: FLATPHONE, INC

FILED
Dec 08, 2007
Secretary of State

Current Principal Place of Business:

6100 HOLLYWOOD BLVD
SUITE 209
HOLLYWOOD, FL 33024

New Principal Place of Business:

Current Mailing Address:

320 SOUTH FLAMINGO ROAD
SUITE 328
PEMBROKE PINES, FL 33027

New Mailing Address:

FEI Number: 20-1874451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DESIR, PAUL U
450 NW 135TH TERRACE
APT. 102
PEMBROKE PINES, FL 33028 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: PS () Delete
Name: DESIR, PAUL U
Address: 450 NW 135TH TERRACE APT 102
City-St-Zip: PEMBROKE PINES, FL

Title: D () Delete
Name: TITUS, DANIELLA
Address: 13003 S.W 24 ST
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: LAGUERRE, MARIE
Address: 4160 NW 21 ST STREET APT G202
City-St-Zip: LAUDERHILL, FL 33313

Title: VP (X) Change () Addition
Name: TITUS, DANIELLA
Address: 13003 S.W 24 ST
City-St-Zip: MIRAMAR, FL 33027

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: PAUL U. DESIR

D

12/08/2007

Electronic Signature of Signing Officer or Director

Date