

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P05000055877

**FILED**  
**Nov 13, 2007**  
**Secretary of State****Entity Name:** CUVOX MARKETING INC.**Current Principal Place of Business:**8970 WEST FLAGLER ST.  
# 101  
MIAMI, FL 33174**New Principal Place of Business:**8970 WEST FLAGLER ST.  
# 101  
MIAMI, FL 33174 US**Current Mailing Address:**8970 WEST FLAGLER ST.  
# 101  
MIAMI, FL 33174**New Mailing Address:**8970 WEST FLAGLER ST.  
# 101  
MIAMI, FL 33174 US**FEI Number:** 02-0750341**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**AGUIRRE, CARLOS  
43 TRUMAN DR.  
WESTON, FL 33326 US**Name and Address of New Registered Agent:**GAMBOA, ALFREDO  
8970 WEST FLAGLER ST.  
#101  
MIAMI, FL 33174 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: ALFREDO GAMBOA

11/13/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** PD ( ) Delete  
**Name:** AGUIRRE, CARLOS  
**Address:** 43 TRUMAN DR.  
**City-St-Zip:** WESTON, FL 33326**Title:** VP (X) Delete  
**Name:** GAMBOA, ALFREDO  
**Address:** 8970 WEST FLAGLER ST. APT. 101  
**City-St-Zip:** MIAMI, FL 33174**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change ( ) Addition  
**Name:** GAMBOA, ALFREDO  
**Address:** 8970 WEST FLAGLER ST. #101  
**City-St-Zip:** MIAMI, FL 33174 US**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**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: ALFREDO GAMBOA

PD

11/13/2007

Electronic Signature of Signing Officer or Director

Date