

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000159564

Entity Name: VOIPARTY, INC.

FILED
Jan 15, 2009
Secretary of State

Current Principal Place of Business:

4419 DEL PRADO BLVD STE 3
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

4419 DEL PRADO BLVD STE 3
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: 20-3896131

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARKHAM, JERIZ
1521 SW 58 ST
CAPE CORAL, FL 33914 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARKHAM, JERIZ
Address: 1521 SW 58 ST
City-St-Zip: CAPE CORAL, FL 33914

Title: SC () Delete
Name: MARKHAM, JERIZ
Address: 1521 SW 58 ST
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MARKHAM, JERIZ
Address: 4419 DEL PRADO BLVD S #3
City-St-Zip: CAPE CORAL, FL 33904

Title: VP (X) Change () Addition
Name: MARTINEZ, CIRO
Address: 4419 DEL PRADO BLVD S #3
City-St-Zip: CAPE CORAL, FL 33904

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: JERIZ MARKHAM

PRES

01/15/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date