

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000082281

Entity Name: VCM NETWORKS, INC.

FILED
Jul 15, 2008
Secretary of State

Current Principal Place of Business:

3497 FOXCROFT CIRCLE
OVIEDO, FL 32765 US

New Principal Place of Business:

2441 W SR 426
SUITE 2031
OVIEDO, FL 32765 US

Current Mailing Address:

10151 UNIVERSITY BLVD
STE 199
ORLANDO, FL 32817 US

New Mailing Address:

2441 W SR 426
SUITE 2031
OVIEDO, FL 32765 US

FEI Number: 06-1781999

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLAUDE, NICOLAS M
3497 FOXCROFT CIRCLE
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

CLAUDE, NICOLAS M
2441 W SR 426
SUITE 2031
OVIEDO, FL 32765 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:

07/15/2008

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: CLAUDE, NICOLAS M
Address: 3497 FOXCROFT CIRCLE
City-St-Zip: OVIEDO, FL 32765 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: NICOLAS CLAUDE

MR.

07/15/2008

Electronic Signature of Signing Officer or Director

Date