

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000096927

Entity Name: LANGUAGESPEAKER, INC.

FILED
Jun 21, 2007
Secretary of State

Current Principal Place of Business:

7065 WESTPOINTE BLVD.
SUITE 314
ORLANDO, FL 32835

New Principal Place of Business:

Current Mailing Address:

7065 WESTPOINTE BLVD.
SUITE 314
ORLANDO, FL 32835

New Mailing Address:

FEI Number: 20-5281785

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAGNAN, RALPH
5639 OXFORD MOOR BLVD.
WINDERMERE, FL 34786 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

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/T () Delete
Name: MAGNAN, RALPH
Address: 5639 OXFORD MOOR BLVD.
City-St-Zip: WINDERMERE, FL 34786

Title: VP/S () Delete
Name: MAGNAN, LIZA RAMCHARIT
Address: 5639 OXFORD MOOR BLVD.
City-St-Zip: WINDERMERE, FL 34786

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP/S () Change (X) Addition
Name: MAGNAN, CLIFFORD
Address: 11661 DELWICK DRIVE
City-St-Zip: WINDERMERE, FL 34786

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: RALPH MAGNAN

P/T

06/21/2007

Electronic Signature of Signing Officer or Director

Date