

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000149514

Entity Name: AVOX AMERICA, INC.

FILED
Oct 07, 2009
Secretary of State

Current Principal Place of Business:

14051 RICHWOOD PLACE
DAVIED, FL 33325

New Principal Place of Business:

Current Mailing Address:

14051 RICHWOOD PLACE
DAVIED, FL 33325

New Mailing Address:

FEI Number: 20-4298816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LITTMAN, ERIC P
7695 S.W. 104TH STREET, STE. 210
MIAMI, FL 33156 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: ERIC LITTMAN

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: PD () Delete
Name: SANDLER, MITCHELL
Address: 14051 RICHWOOD PLACE
City-St-Zip: DAVIED, FL 33325

Title: VD () Delete
Name: CROUPPEN, STEVE
Address: 14051 RICHWOOD PLACE
City-St-Zip: DAVIED, FL 33325

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: SANDLER, MITCHELL B
Address: 14051 RICHWOOD PLACE
City-St-Zip: DAVIE, FL 33325

Title: VD (X) Change () Addition
Name: RODRIGUEZ, GUSTAVO
Address: 14051 RICHWOOD PLACE
City-St-Zip: DAVIE, FL 33325

Title: D () Change (X) Addition
Name: CONTI, ANTHONY
Address: 14051 RICHWOOD PLACE
City-St-Zip: DAVIE, FL 33325

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: MITCHELL B. SANDLER

PSD

10/07/2009

Electronic Signature of Signing Officer or Director

Date