## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 28, 2008 8:00 am Secretary of State

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1. Entity Name	MENT # P0700006 VORX, INC	997			04-28-2008 9	0342 027 ***15	0.00	
Principal Place	e of Business	Mailing Address			•			
C/O 8569 PI		C/O 8569 PINES BLVD						
SUITE 212	NES BEVD	SUITE 212						
PEMBROKE PINES, FL 33024 US PEMBROKE PINES, FL 33024		33024 US						
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2. Principal Place of Business - No P.O. Box # 46 8569 Pines Blod		3. Mailing Address 70 8569 Pines Blod						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04212008	Chg-P	CR2E034 (12/06)		
Ste 214		· · · · · · · · · · · · · · · · · · ·		4 551 North		1 140	olied For	
City & State Pembroke Pines, FL		City & State  Dembroke Pines, FL		4. FEI Numb	" 20-8250	~ ^ - <del>  -   -   -   -   -   -   -   -   - </del>	Applicable	
Zin	Country	Zip	Country	- O	-1 C1-1-1	□ \$8.75 Add	tional	
330	24   ÚSA	33024	iusa	5. Certificate	of Status Desired	Fee Required		
	6. Name and Address of Current	Registered Agent		7Name and	Address of New Reg	istered Agent		
			Name		,			
DANIELSON, STEVEN R								
8569 PINES BLVD			Street Add	Street Address (P.O. Box Number is Not Acceptable)				
SUITE 212								
PEMBROK	KE PINES, FL 33024							
			City			FL Zip Code	• [	
D. The shows	named entity submits this statement fo	the oursess of changing its	ragistared office or re	oistered agent, or bo	th in the State of Flori	da Lam familiar with	and accept	
	tions of registered agent.	tille purpose or changing its i	egistered diffice of re	gistered agent, or de	in, in the state on their	Da. Tarritanina war,	and accept	
		•						
SIGNATURE					<del> </del>	DATE		
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	Registered Agent signature	required when reinstating)		UAIE		
		9. Election Campai	on Financing	\$5.00 May Be				
FIL After M:	.E NOW!!!  FEE I\$ \$150.00 ay 1, 2008 Fee will be \$550.0			Added to Fees			,	
	4							
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS	CHANGES TO OFFIC	ERS AND DIRECTORS		
TITLE	P	☐ Delete	TITLE	Υ		Change	Addition	
NAME .	GUTIERREZ, MARIA'S	A Section 1	NAME	Gutierrez, M	eria es Blod, Ste 2			
STREET ADDRESS	C/O 8569 PINES BLVD STE 212	N. T.		6/9 8204 hin	es blown ste 2			
CITY-ST-ZIP	PEMBROKE PINES, FL 33024		CITY-ST-ZIP	rembroke f.	nes, FC 330%	24		
TITLE	A Company	☐ Delete	TITLE			☐ Change	Addition	
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STREET ADDRESS	1		STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			Change	☐ Addition	
NAME			NAME			· - · -		
STREET ADDRESS			STREET ADDRESS					
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1		☐ Deleie				Change	☐ Addition	
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CITY-ST-ZIP		☐ Delete	CITY-ST-ZIP			☐ Change	☐ Addition	
CITY-ST-ZIP TITLE NAME		□ Delete	CITY-ST-ZIP TITLE NAME			☐ Change	☐ Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ Delete	CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS			☐ Change	☐ Addition	
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP			CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP					
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CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with	□ Delete	CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	stained in Chapter 11 te the same legal effe	9, Florida Statutes. I fi ct as if made under oa	☐ Change	☐ Addition	
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