FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000011652

1. Corporation Name
TOP TALK, INC.

Principal Place of Business	Mailing Address
5580 58TH AVENUE NORTH ST. PETERSBURG FL 33709	5580 58TH AVENUE NORTH ST. PETERSBURG FL 33709

DO NOT WRITE IN THIS SPACE

	2. Principal Place of Business	2a. Mailing Address		3. Date Incorporated or Qualifed
21		26		**02/02/1996**

	Suite, Apt. #, etc.		Suite, Apt. #, etc.	4. FEI Number	Applied For
22		27		**59-3367659**	Not Applicable

	City & State		City & State	5. Certifcate of Status Desired ☐	**$8.75** Additional Fee Required
23		28			

	Zip	Country		Zip	Country	6. Election Campaign Financing ☐ Trust Fund Contribution	**$5.00** May Be Added to Fees
24		25	29		30		

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent
CURTIS, RALPH D 5580 58TH AVENUE NORTH ST. PETERSBURG FL 33709	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City	

84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE _____

CR2E034 (11/98)

12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	☐ DELETE	1.1 TITLE	☐ Change	☐ Addition
NAME	CURTIS, RALPH D		1.2 NAME		
STREET ADDRESS	5580 58TH AVENUE NORTH		1.3 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL 33709		1.4 CITY-ST-ZIP		
TITLE	VS	☐ DELETE	2.1 TITLE	☐ Change	☐ Addition
NAME	CURTIS, KRISTINE N		2.2 NAME		
STREET ADDRESS	5580 58TH AVENUE NORTH		2.3 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL 33709		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE	☐ Change	☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE	☐ Change	☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE	☐ Change	☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE	☐ Change	☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Ralph Curtis_ Ralph Curtis/President   4-9-99   727-545-3666
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #