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

**PROFIT** Feb 20 1998 8:00am ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #

1. Corporation Name K86142 (2)MALLTALK, INC. Principal Place of Business Mailing Address 4900 CREEKSIDE DR. 4900 CREEKSIDE DR. **SUITE 3** SUITE E DO NOT WRITE IN THIS SPACE **CLEARWATER FL 34620** CLEARWATER FL 34620 3. Date Incorporated or Qualified 05/07/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2957262 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 30 29 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WIAND, BURTON W. 601 CLEVELAND ST 82 Street Address (P.O. Box Number is Not Acceptable) **STE 800** 83 CLEARWATER FL 34617 84 City 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, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstaling) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE 1.1 TITLE ARTHUR, JEFFREY NAME 1.2 NAME 4900 CREEKSIDE DR., #E 1.3 STREET ADDRESS STREET ADDRESS **CLEARWATER FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE **NOYES, JANSEN J** NAME 2.2 NAME **50 BROAD STREET** 2.3 STREET ADDRESS STREET ADDRESS **NEW YORK NY** 2. 4 CITY - ST - ZIP CITY-ST-ZIP TITLE DELETË 3.1 TITLE ☐ Change ☐ Addition ARTHUR, DONALD M. NAME 3.2 NAME 150 2ND AVENUE N. #820 STREET ADDRESS 3.3 STREET ADDRESS **ST. PETERSBURG FL** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE NAME BRADLEY, KEVIN 4.2 NAME 1674 N. BELCHER ROAD STREET ADDRESS 4.3 STREET ADDRESS CLEARWATER FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ☐ Addition TOTLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE ☐ Change Addition TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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 chapter 607, Florida Statutes.

**FILED**