2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002444

Entity Name: STRAIGHT TALK, INC.

FILED Jul 15, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

166 N. UNIVERSITY DRIVE 9965 MIRAMAR PKWY

PEMBROKE PINES, FL 33024 SUITE 174

MIRAMAR, FL 33025

Current Mailing Address: New Mailing Address:

166 N. UNIVERSITY DRIVE 9965 MIRAMAR PKWY
PEMBROKE PINES, FL 33024 SUITE 174
MIRAMAR. FL 33025

FEI Number: 20-2609915 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PURI, JASMINE DEVI 5420 NW 11TH ST. 9965 MIRAMAR PKWY LAUDERHILL, FL 33313 US 174

MIRAMAR, FL 33313 US

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: JASMINE DEVI PURI 07/15/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 PURI, JASMINE DEVI
 Name:
 PURI, JASMINE DEVI

 Address:
 5420 NW 11TH ST
 Address:
 9965 MIRAMAR PKWY SUITE #174

City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip: MIRAMAR, FL 33025

Title: VP () Delete Title: () Change () Addition

 Name:
 DELLA VECCHIA, ALLISON
 Name:

 Address:
 5700 MOUNTAIN TRL
 Address:

 City-St-Zip:
 SNOW CAMP, NC 27349
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 CARTER, DARLENE
 Name:

 Address:
 11107 RISING MIST BLVD
 Address:

 City-St-Zip:
 RIVERVIEW, FL 33569
 City-St-Zip:

 $\label{eq:time_state} {\sf Title:} \qquad \qquad {\sf S} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad \qquad (\) \, {\sf Change} \, (\) \, {\sf Addition}$

 Name:
 VARGAS, DIANE
 Name:

 Address:
 3200 NE 9TH AVE
 Address:

 City-St-Zip:
 POMPNAO BEACH, FL 33064
 City-St-Zip:

 Name:
 WALLEN, MONIQUE
 Name:
 DENNIS, MONIQUE

 Address:
 1188 NW 40TH AVE - # 214
 Address:
 5284 GATE LAKE RD

 City-St-Zip:
 LAUDERHILL, FL 33313
 City-St-Zip:
 TAMARAC, FL 33319

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JASMINE DEVI PURI P 07/15/2008