

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000002444

FILED
Nov 12, 2009
Secretary of State

Entity Name: STRAIGHT TALK, INC.

Current Principal Place of Business:

9965 MIRAMAR PKWY
SUITE 174
MIRAMAR, FL 33025

New Principal Place of Business:

10693 WILES RD.
155
CORAL SPRINGS, FL 33076

Current Mailing Address:

9965 MIRAMAR PKWY
SUITE 174
MIRAMAR, FL 33025

New Mailing Address:

10693 WILES RD.
155
CORAL SPRINGS, FL 33076

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:

PURI, JASMINE DEVI
9965 MIRAMAR PKWY
174
MIRAMAR, FL 33313 US

Name and Address of New Registered Agent:

PURI, JASMINE DEVI
10693 WILES RD.
155
CORAL SPRINGS, FL 33076 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

11/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PURI, JASMINE DEVI
Address: 9965 MIRAMAR PKWY SUITE #174
City-St-Zip: MIRAMAR, FL 33025

Title: VP () Delete
Name: DELLA VECCHIA, ALLISON
Address: 5700 MOUNTAIN TRL
City-St-Zip: SNOW CAMP, NC 27349

Title: T () Delete
Name: CARTER, DARLENE
Address: 11107 RISING MIST BLVD
City-St-Zip: RIVERVIEW, FL 33569

Title: S () Delete
Name: VARGAS, DIANE
Address: 3200 NE 9TH AVE
City-St-Zip: POMPNAO BEACH, FL 33064

Title: D () Delete
Name: DENNIS, MONIQUE
Address: 5284 GATE LAKE RD
City-St-Zip: TAMARAC, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PURI, JASMINE DEVI
Address: 10693 WILES RD. #155
City-St-Zip: CORAL SPRINGS, FL 33076

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

11/12/2009

Electronic Signature of Signing Officer or Director

Date