

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000000873

FILED  
Aug 23, 2012  
Secretary of State

Entity Name: GIRL TALK 1 ON 1, INC.

**Current Principal Place of Business:**

14320 SW 106 COURT  
MIAMI, FL 33176

**New Principal Place of Business:**

**Current Mailing Address:**

14320 SW 106 COURT  
MIAMI, FL 33176

**New Mailing Address:**

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired ( )

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

WRIGHT-ROBINSON, LAWANDA R  
14320 SW 106 COURT  
MIAMI, FL 33176    US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title:                      PRES  
Name:                      ROBINSON, SHAQUIRA A  
Address:                      14320 SW 106 COURT  
City-St-Zip:                      MIAMI, FL 33176

Title:                      VP  
Name:                      VALLADARES, KEYLA  
Address:                      14320 SW 106 COURT  
City-St-Zip:                      MIAMI, FL 33176

Title:                      TREA  
Name:                      WRIGHT-ROBINSON, LAWANDA R  
Address:                      14320 SW 106 COURT  
City-St-Zip:                      MIAMI, FL 33176

I hereby 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 all other like empowered.

SIGNATURE: LAWANDA WRIGHT-ROBINSON

TREA

08/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date