

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000079918

FILED
Feb 08, 2002 8:00 AM
Secretary of State

Entity Name: TALK2REP.COM INC.

Current Principal Place of Business:

8795 WEST MCNAB, #200
TAMARAC, FL 33321

New Principal Place of Business:

8795 W MCNAB ROAD
SUITE 200
TAMARAC, FL 33321

Current Mailing Address:

8795 WEST MCNAB, #200
TAMARAC, FL 33321

New Mailing Address:

8795 W MCNAB ROAD
SUITE 200
TAMARAC, FL 33321

FEI Number: 65-1120097

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RYAN, JIM
5463 N.W. 93RD WAY
COCONUT CREEK, FL 33023 US

Name and Address of New Registered Agent:

RYAN, JIM
8795 W MCNAB ROAD
SUITE 200
TAMARAC, FL 33321 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: JIM RYAN

02/08/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: RYAN, JIM
Address: 5463 N.W. 43RD WAY
City-St-Zip: COCONUT CREEK, FL 33073

Title: CTO () Delete
Name: WALKER, JIM
Address: 2817 NE 16TH TERRACE
City-St-Zip: WILTON MANORS, FL 33334

Title: VPCS () Delete
Name: KOCH, TOM
Address: 946 S.W. 35TH COURT
City-St-Zip: BOYNTON BEACH, FL 33435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: RYAN, JIM
Address: 8795 W MCNAB ROAD, SUITE 200
City-St-Zip: TAMARAC, FL 33321

Title: CTO (X) Change () Addition
Name: WALKER, JIM
Address: 8795 W MCNAB ROAD, SUITE 200
City-St-Zip: TAMARAC, FL 33321

Title: VPCS (X) Change () Addition
Name: KOCH, TOM
Address: 8795 W MCNAB ROAD, SUITE 200
City-St-Zip: TAMARAC, FL 33321

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOM KOCH

VPCS

02/08/2002

Electronic Signature of Signing Officer or Director

Date