

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000079918

FILED
Mar 17, 2003
Secretary of State

Entity Name: TALK2REP INC.

Current Principal Place of Business:

8795 W MCNAB ROAD
SUITE 300
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

8795 W MCNAB ROAD
SUITE 300
TAMARAC, FL 33321

New Mailing Address:

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
8795 W MCNAB ROAD
SUITE 300
TAMARAC, FL 33321 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: RYAN, JIM
Address: 8795 W MCNAB ROAD, SUITE 300
City-St-Zip: TAMARAC, FL 33321

Title: CTO () Delete
Name: WALKER, JIM
Address: 8795 W MCNAB ROAD, SUITE 300
City-St-Zip: TAMARAC, FL 33321

Title: VPCS () Delete
Name: KOCH, TOM
Address: 8795 W MCNAB ROAD, SUITE 300
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change () Addition
Name: RYAN, JAMES
Address: 8795 W MCNAB ROAD, SUITE 300
City-St-Zip: TAMARAC, FL 33321

Title: DV (X) Change () Addition
Name: WALKER, JAMES
Address: 8795 W MCNAB ROAD, SUITE 300
City-St-Zip: TAMARAC, FL 33321

Title: PD (X) Change () Addition
Name: KOCH, THOMAS
Address: 8795 W MCNAB ROAD, SUITE 300
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: THOMAS KOCH

PD

03/17/2003

Electronic Signature of Signing Officer or Director

Date