

9/10/2003-90056-033-\$150.00-\$150.00

03 SEP 22 AM 10:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # PD1000093171

1. Entity Name
NOW YOUR TALKING PCS INC.

Principal Place of Business
21625 VILLAGE SHOPPING CENTER
LAND O LAKES, FL 34639

Mailing Address
21625 VILLAGE SHOPPING CENTER
LAND O LAKES, FL 34639

90155318

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

22-3828889

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ANDERSON, DAVID
1301 S VALRICO RD
VALRICO, FL 33694

7. Name and Address of New Registered Agent

Name
Robert Ekle Jr

Street Address (P.O. Box Number is Not Acceptable)

5008 ROYAL Cypress Cir

City
TAMPA

FL

Zip Code
33647

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and his or her capacity

Signature, typed or printed name of registered agent and his or her capacity

DATE

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
P
NAME
EKLE, ROBERT
STREET ADDRESS
2803 BLOOMINGDALE AVE
CITY-ST-ZIP
VALRICO, FL 33694

☐ Delete

TITLE
VP/COO
NAME
Jeremy Connelly
STREET ADDRESS
5008 Royal Cypress Cir
CITY-ST-ZIP
TAMPA FL 33647

☐ Change ☒ Addition

TITLE
VP
NAME
ANDERSON, DAVID
STREET ADDRESS
1301 S VALRICO RD
CITY-ST-ZIP
VALRICO, FL 33694

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Delete

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CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Robert Ekle**

SIGNATURE AND TYPED OR PRINTED NAME OF BOARDING OFFICER OR DIRECTOR

8-29-03 813 732-8819

DATE

Document Number

CPRE004 (10/02)

Attachment

90155318

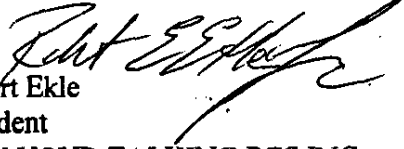
#P01000093171

Dept of Revenue

This letter is in reference to the UBR That was due by May 1st.

Please waive the late for we never had received notice. The form we are using was one that was downloaded of the web site. I will make sure that this form is not late going forward.

Sincerely


Robert Ekle

President

NOW YOUR TALKING PCS INC

21625 Village Lakes Shopping Center

Land O Lakes Fl 34639
