2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000027841

Entity Name: TOTAL SPEECH SERVICES, INC.

FILED Aug 10, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2401 HUNTINGTON BLVD
SAFTY HARBOR, FL 34695
2401 HUNTINGTON BLVD
SAFETY HARBOR, FL 34695
SAFETY HARBOR, FL 34695

Current Mailing Address: New Mailing Address:

2401 HUNTINGTON BLVD
SAFTY HARBOR, FL 34695
2401 HUNTINGTON BLVD
SAFETY HARBOR, FL 34695

FEI Number: 03-0404316 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TRONCOCO, DELIA M
2401 HUNTINGTON BLVD
SAFTY HARBOR, FL 34695

TRONCOCO, DELIA M
2401 HUNTINGTON BLVD
SAFETY HARBOR, FL 34695

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: 08/10/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete Name: TRONCOSO, DELIA M

Address: 2401 HUNTINGTON BLVD
City-St-Zip: SAFTY HARBOR, FL 34695

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition

 Name:
 TRONCOSO, DELIA M

 Address:
 2401 HUNTINGTON BLVD

 City-St-Zip:
 SAFETY HARBOR, FL 34695

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: DELIA TRONCOSO D 08/10/2003