2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000107633

Entity Name: TALK SOLUTIONS, INC.

FILED Apr 18, 2007 Secretary of State

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

1100 N. TUTTLE AVENUE #3 SARASOTA, FL 34237

Current Mailing Address: New Mailing Address:

8004 NW 154 STREET # 298 MIAMI LAKES, FL 33016

FEI Number: 51-0550446 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:

SMITH, JUANA
1100 N. TUTTLE AVENUE
#3
SARASOTA, FL 34327 US

BARROSO, ALEXANDER
25 W SILVER STAR ROAD
ORLANDO, FL 34761 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: ALEXANDER BARROSO 04/18/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS () Delete Title: (X) Change () Addition SMITH, JUANA SMITH, JUANA Name: Name: 10645 EURIKA ST. 10645 EURIKA ST. Address: Address: City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: BOCA RATON, FL 33428

Title: VP () Delete Title: () Change () Addition

 Name:
 NAJAR, HECTÓR
 Name:

 Address:
 10645 EURIKA ST.
 Address:

 City-St-Zip:
 BOCA RATON, FL 33428
 City-St-Zip:

Title: VP () Delete Title: VP (X) Change () Addition Name: MUSTATA, EDUARDO Name: BARROSO, MARIA W

 Name
 MOSTATA, EDOARDO
 Name
 BARROSO, MARIA W

 Address:
 6741 N.W. 8 ST.
 Address:
 655 POSTRIO WAY

 City-St-Zip:
 MARGATE, FL 33063
 City-St-Zip:
 ORLANDO, FL 34761

Title: () Delete Title: PS () Change (X) Addition

 Name:
 Name:
 ALEXANDER BARROSO,

 Address:
 655 POSTRIO WAY

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 34761

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ALEXANDER BARROSO PS 04/18/2007