## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000107633

Entity Name: TALK SOLUTIONS, INC.

FILED Apr 11, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1100 N. TI # 3	UTTLE AVENU	E					
	TA, FL 34237						
Current Mailing Address:				New Mailing Address:			
8004 NW 154 STREET				1100 N TUTTLE AVE			
# 298 MIAMI LAKES, FL 33016				#3 SARASOTA, FL 34237			
FEI Number	: 51-0550446	FEI Number Applied For ( )	FEI Number N	ot Applicable	e() (	Certificate of Status Desire	ed ( )
Name and	d Address of C	urrent Registered Agent:	Nam	e and Add	lress of Ne	w Registered Agent:	
BARROSO, ALEXANDER 25 W SILVER STAR ROAD ORLANDO, FL 34761 US				BARROSO, MARIA W 25 W SILVER STAR ROAD ORLANDO, FL 34761 US			
	e named entity s e of Florida.	submits this statement for the p	purpose of char	ging its req	gistered offi	ce or registered agent,	, or both,
SIGNATURE: MARIA BARROSO				04/11/2008			
	Electron	ic Signature of Registered Ag	ent			Date	
Election Car	mpaign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR			
Title: Name: Address: City-St-Zip:	VP () SMITH, JUANA 10645 EURIKA BOCA RATON,		Title: Name Addre City-S	ss:	( ) C	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () NAJAR, HECTO 10645 EURIKA BOCA RATON,	ST.	Title: Name Addre City-S	ss:	()0	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () BARROSO, MA 655 POSTRIO \ ORLANDO, FL	WAY	Title∶ Name Addre City-S	ss: 655	S (X) C RROSO, MARI POSTRIO W LANDO, FL 3	AY	
Title: Name: Address: City-St-Zip:	PS () ALEXANDER B 655 POSTRIO \ ORLANDO, FL	WAY	Title: Name Addre City-S	ss: 655	(X) C EXANDER BAR POSTRIO WA LANDO, FL 3	AY	

I hereby certify that the information supplied with this filing does not qualify 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: MARIA BARROSO VP S 04/11/2008