

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 23, 2006 8:00 am
Secretary of State

03-23-2006 90024 024 ***150.00

DOCUMENT # P96000027626

1. Entity Name

TALK INK, INC.



Principal Place of Business

8027 MIZNER LANE
BOCA RATON FL 33433

Mailing Address

8027 MIZNER LANE
BOCA RATON FL 33433

2. Principal Place of Business

12915 Kings Crossing Dr.
Suite, Apt. #, etc.

3. Mailing Address

12915 Kings Crossing Dr.
Suite, Apt. #, etc.

City & State

Gibsonton, FL

Zip
33534

Country

Hillsborough

City & State

Gibsonton, FL

Zip
33534

Country

Hillsborough

4. FEI Number

65-0666680

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCHOENEWEISS, SALLY
8027 MIZNER LANE
BOCA RATON FL 33433

7. Name and Address of New Registered Agent

Name Schoeneweiss, Sally

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

12915 Kings Crossing Dr.

City Gibsonton

FL

Zip Code

33534

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

Sally Schoeneweiss

Signature, typed or printed name of registered agent and line if applicable

(NOTE: Registered Agent signature required when reconstituting)

3/13/06

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing

Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME SCHOENEWEISS, SALLY
STREET ADDRESS 8027 MIZNER LANE
CITY-ST-ZIP BOCA RATON FL 33433 ☐ Delete

TITLE V
NAME SCHOENEWEISS, SALLY
STREET ADDRESS 8027 MIZNER LANE
CITY-ST-ZIP BOCA RATON FL 33433 ☐ Delete

TITLE S
NAME SCHOENEWEISS, RUDI
STREET ADDRESS 8027 MIZNER LANE
CITY-ST-ZIP BOCA RATON FL 33433 ☐ Delete

TITLE T
NAME SCHOENEWEISS, SALLY
STREET ADDRESS 8027 MIZNER LANE
CITY-ST-ZIP BOCA RATON FL 33433 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 12915 Kings Crossing Dr.
CITY-ST-ZIP Gibsonton, FL 33534 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 12915 Kings Crossing Dr.
CITY-ST-ZIP Gibsonton, FL 33534 ☒ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Sally Schoeneweiss

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/06

Date

813.677.9790

Daytime Phone #