

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

**Apr 24 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000031729 (2)

1. Corporation Name
JVE TALK, INC.



Principal Place of Business 5761 WASHINGTON STREET SUITE 3C HOLLYWOOD FL 33023	Mailing Address 5761 WASHINGTON STREET SUITE 3C HOLLYWOOD FL 33023
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3590 S. STATE RD 7 Suite, Apt. #, etc. 22 SUITE 219 City & State 23 MIRAMAR, FL Zip 24 33023-5299	2a. Mailing Address 26 3590 S. STATE RD 7 Suite, Apt. #, etc. 27 SUITE 219 City & State 28 MIRAMAR, FL Zip 29 33023-5299	Country 25 Country 30
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3. Date Incorporated or Qualified 04/10/1996	4. FEI Number 65-0658090	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent

LOWELL E. GLICK
5761 WASHINGTON ST
SUITE 3C
HOLLYWOOD FL 33023

10. Name and Address of New Registered Agent

81 Name LOWELL E. GLICK
82 Street Address (P.O. Box Number is Not Acceptable) 5761 WASHINGTON ST.
83 SUITE C3
84 City HOLLYWOOD
85 Zip Code FL 33023

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Lowell E. Glick* **LOWELL E. GLICK, PRESIDENT** DATE **3/13/98**

Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE PM	<input type="checkbox"/> DELETE
NAME GLICK, LOWELL E	
STREET ADDRESS 5761 WASHINGTON STREET SUITE 3C	
CITY-ST-ZIP HOLLYWOOD FL	
TITLE VSTD	<input checked="" type="checkbox"/> DELETE
NAME OSOC, DIANA L	
STREET ADDRESS 5761 WASHINGTON ST., SUITE 3C	
CITY-ST-ZIP HOLLYWOOD FL	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PTSM	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME GLICK, LOWELL E,	
1.3 STREET ADDRESS 5761 WASHINGTON ST., APT. C3	
1.4 CITY-ST-ZIP HOLLYWOOD, FL 33023	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Lowell E. Glick* **LOWELL E. GLICK, PRESIDENT** DATE **3/13/98**

CR2E034 (10/97)