


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

FILED  
May 07 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000015759 (8) 1. Corporation Name MY TALKING RESUME, INC.			
Principal Place of Business <del>1401 UNIVERSITY DRIVE SUITE 301 CORAL SPRINGS FL 33071</del>		Mailing Address <del>1401 UNIVERSITY DRIVE SUITE 301 CORAL SPRINGS FL 33071</del>	
2. Principal Place of Business 21 138 N. SWINTON AVE Suite, Apt. #, etc. 22 City & State 23 DELRAY BEACH, FL Zip 24 33444 Country 25 PALM BEACH		2a. Mailing Address 26 90 RS Simms Suite, Apt. #, etc. 27 138 N. SWINTON AVE City & State 28 DELRAY BEACH, FL Zip 29 33444 Country 30 PALM BEACH	
9. Name and Address of Current Registered Agent DOBROW, RICHARD S 1401 UNIVERSITY DRIVE SUITE 301 CORAL SPRINGS FL 33071		10. Name and Address of New Registered Agent 81 Name RS SIMMS 82 Street Address (P.O. Box Number is Not Acceptable) 138 N. SWINTON AVE 83 84 City DELRAY BEACH FL 85 Zip Code 33444	
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 RS Simms RS Simms 5/1/98 Signature type for printed name of registered agent and if that applicable (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS TITLE P NAME HENRICH, JOHN STREET ADDRESS 1401 UNIVERSITY DR., SUITE 301 CITY-ST-ZIP CORAL SPRINGS FL 33071 TITLE ST NAME HENRICH, ANITA STREET ADDRESS 1401 UNIVERSITY DR., SUITE 301 CITY-ST-ZIP CORAL SPRINGS FL 33071 TITLE D NAME RS SIMMS STREET ADDRESS 6501 CONTEMPO LN CITY-ST-ZIP BOCA RATON, FL 33433 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/19/1997	
4. FEI Number 59-3438780	Applied For 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	

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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 RS Simms RS Simms 4/3/98 (41) 229-7511

CR2E034 (10/97)