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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortiam

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000044140 (6)

FILED
May 04 1998 8:00am
Secretary of State

TALK	COMMUNICATIONS INC.					
Principal Plac	ce of Business	Mailing	Address			
P.O. BOX 92		_	OX 824321			
BOCA PATON FL 33497 BOCA PATON FL 33497						
						DO NOT WRITE IN THIS SPACE
!			•			3. Date Incorporated or Qualified
2. Principal F	Place of Business	2a. Mail	ing Address			05/15/1997 4. FEI Number Applied For
21 <i>33</i> 7.			50	me		65-0751300 Not Applicable
Suite, Apt			o, Apt. #, etc.			\$9.75 Additional
27						6. Certificate of Status Desired Fee Required
23 Deer Field Beach 23			ly & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip 334	Country	⊢¬ Zip	_	_ Country	•	8. This corporation owes or has paid the current year Intengible
24 334	9. Name and Address of Curren	29	3(	0 ,		Personal Property Tax due June 30. Yes No
A.		ii uahisisisi	Agent	81	Name	10. Name and Address of New Registered Agent
	PLEBAUM, LORI 168-ARBOR OAKS-LANE #104					
I .	CA-RATOR PL-82497			82	Street	t Address (P.O. Box Number is Not Acceptable)
		1	01.1	83		——————————————————————————————————————
3	375 W. Hills	'poro	B104	.	O'A.	
Dec	375 W. Hills erfield Benen	1 FI	33442	7  84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.15	08, Florida Statutes	, the above	e-named	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
agent. I a	am familiar with, and accept the oblig-	ations of, Sec	uon 607,05 Florid	da tatute	7 tile COI)	Thoration's board of directors. Thereby accept the appointment as registered
SIGNATURE	X LORI APPIEBAU	m X	AME		SPA	Day 1/29/18
12.	gnature, typed or printed name of registered age OFFICERS AN			13.	orgignature	re required when reinsilling)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	ti tame of our	DELETE	1.1 TITLE		P Change Addition
NAME	APPLEBAUM, LORI	_	_	1.2 NAME		APPIEBAUM, LORI
STREET ADDRESS	SEUR ARBOR CAKE LANE F	104		1.3 STREET	ADDRESS	I SEE W. HillSROPA BIUG
CITY-ST-ZIP	-BOCA RATON FL 33428			1.4 CITY - S	T-ZIP	beerfield BEACH FI 33442
TITLE	V		☐ DELETE	2.1 TITLE		<b>∨P</b> ☐ Change ☐ Addition
NAME	KARRAS, THOMAS			2.2 NAME		KARRAS, THOMAS
STREET ADDRESS	9000-APBOR DAKS LANE P	104	!	23 STREET	ADDRESS	
CITY-ST-ZIP	-BOCA RATON FL 33428		T DESCRIE	2 4 CITY-	ST-ZIP	Deer Field BEACH FI 33442
TITLE			DEFELE	3 1 TITLE		Change Addition
NAME STREET ADDRESS	ļ			32 NAME	ADDDCCC	
CITY-ST-ZIP	j			3 3 STREET		
TITLE	<u> </u>		DELETE	4.1 TITLE	DI * 4.10"	Change Addition
NAME	[		_	4. 2 NAME		
STREET ADDRESS	1			4.3 STREET	ADDRESS	
CITY - ST - ZIP				4.4 CITY - S	T-ZIP	
TITLE			DELETE	5.1 TITLE		Change Addition
NAME				5.2 NAME		
STREET ADDRESS	ļ		-1	5.3 STREET	ADDRESS	
CITY-ST-Z#P				5.4 CITY-S	T-ZIP	
TITLE			DELETÉ	6.1 TITLE		☐ Change ☐ Addition
NAME				6.2 NAME		
STREET ADDRESS			ı	6.3 STREET		
CITY-ST-ZIP	Cortify that the information supplied w	ith this filma s	toon not qualify for t	6.4 CITY-S		ted in Section 119.07(3)(i). Florida Statutes. I further certify that the information

14. Thereby 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 suppliemental 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 roceiver 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: X LORI APPIEBAUMX DISTRICTION