

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000096398

1. Entity Name

STAR TALK, INC.

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90083 009 ***150.00

Principal Place of Business

218 NORTH GORDON ROAD
FT LAUDERDALE FL 33301-3736

Mailing Address

218 NORTH GORDON ROAD
FT LAUDERDALE FL 33301-3736

2. Principal Place of Business

7256 W. OAKLAND PARK BLVD

3. Mailing Address

7256 W. OAKLAND PK. BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LAUDERHILL FL

City & State

LAUDERHILL FL

4. FEI Number

65-0969511

Applied For

Not Applicable

Zip

33313

Country

BROWARD

Zip

33313

Country

BROWARD

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RYAN, JAMES
218 NORTH GORDON ROAD
FT LAUDERDALE FL 33301-3736

7. Name and Address of New Registered Agent

Name

SIDNEY JOBEL

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

11547 PAMPLONA BLVD

City

BOYNTON BEACH

FL

Zip Code

33437

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.

SIGNATURE

Sidney Nobel

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

(NOTE: Registered Agent signature required when reinstating)

4/19/00

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	DAWSON, KIM	
STREET ADDRESS	218 NORTH GORDON ROAD	
CITY-ST-ZIP	FT LAUDERDALE FL 33301-3736	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	RYAN, JAMES	
STREET ADDRESS	218 NORTH GORDON ROAD	
CITY-ST-ZIP	FT LAUDERDALE FL 33301-3736	
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		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRES	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SECY. TREAS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SIDNEY JOBEL	
STREET ADDRESS	11547 PAMPLONA BLVD	
CITY-ST-ZIP	BOYNTON BEACH FL 33437	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sidney Nobel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/19/00

954-747-9553

CR2E034 (9/99)