

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S38300

1. Entity Name

TALK-WRITE, INC.

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90168 025 ***150.00

Principal Place of Business

2854 STIRLING ROAD
#M
HOLLYWOOD FL 33020
US

Mailing Address

827 NW 79TH TERR
PLANTATION FL 33324-1465
US

2. Principal Place of Business

827 NW 79TH TERR.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Plantation FL

City & State

4. FEI Number

65-0256291

Applied For

Not Applicable

Zip

Country

33324-1465

USA

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ZIMET, CONNIE
2854 STIRLING RD
STE M
HOLLYWOOD FL 33020

Name

Connie Zimet

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

827 NW 79TH TERR.

City

Plantation

FL

Zip Code
33324-1465

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

Connie Zimet

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-28-00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PST
ZIMET, CONNIE
2854 STIRLING RD STE M
HOLLYWOOD FL 33020

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
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STREET ADDRESS
CITY-ST-ZIP

PST
CONNIE ZIMET
827 NW 79TH TERRACE
PLANTATION FL 33324-1465

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ Change ☐ Addition

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:

Connie Zimet

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-00 954-929-5903

Date

Daytime Phone #

CR2E034 (9/99)