2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007
Secretary of State

DOCUMENT# N01000002224

Entity Name: ATAYAL, INC.

Current Principal Place of Business:

656 MAGNOLIA DRIVE
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

5703 RED BUG LAKE RD
#138
WINTER SPRINGS, FL 32708

Current Mailing Address:

656 MAGNOLIA DRIVE
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

5703 RED BUG LAKE RD
#138
WINTER SPRINGS, FL 32708

FEI Number: 59-3719572 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COOLIDGE, TONY
656 MAGNOLIA DRIVE
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

COOLIDGE, TONY
5703 RED BUG LAKE RD
#138
WINTER SPRINGS, FL 32708 US

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: /TONY COOLIDGE/ 04/18/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: COOLIDGE, TONY
Address: 656 MAGNOLIA DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: T ( ) Delete
Name: COOLIDGE, SHU-MIN H
Address: 656 MAGNOLIA DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: COOLIDGE, TONY
Address: 5703 RED BUG LAKE RD #138
City-St-Zip: WINTER SPRINGS, FL 32708

Title: T (X) Change ( ) Addition
Name: COOLIDGE, SHU-MIN H
Address: 5703 RED BUG LAKE RD #138
City-St-Zip: WINTER SPRINGS, FL 32708

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: /TONY COOLIDGE/ D 04/18/2007
Electronic Signature of Signing Officer or Director Date