~2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2006 08:00 AN Secretary of State **DOCUMENT # P00000004625** 1. Entity Name DON TALLET IV, INC. Mailing Address Principal Place of Business 4401 N.W. 7TH STREET 4401 N.W. 7TH STREET MIAMI, FL 33126 MIAMI, FL 33126 04262006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0986004 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LUACES, LORENZO L DO NOT WRITE 4401 NW 7 STREET IN THIS SPACE MIAMI, FL 33126 3. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Recistered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150,00 After May 1, 2006 Fee will be \$350.00 UMM000552583 Trust Fund Contribution. Added to Fees 105/15/06-80011-020 150.00 OFFICERS AND DIRECTORS 10. TIT) F NAME LUACES, LORENZO L STREET ADDRESS 4401 NW 7 STREET CITY-ST-ZIP MIAMI, FL 33126 THE NAME STREET ADDRESS CSY-ST-ZP TIT: F NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TILE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 unstee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with all angless, with all other like empowered.

SIGNATURE:

ONLY TOP AND TYPED ON PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

0826-06

305)446-494P