

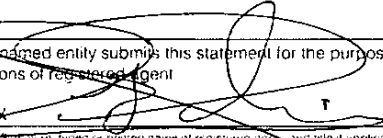
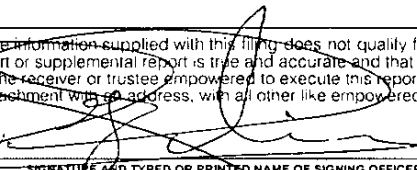


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2007 8:00 am**  
**Secretary of State**

04-18-2007 90177 038 \*\*\*150.00

<b>DOCUMENT # P02000034109</b>					
<b>1. Entity Name</b> TALIC INVESTMENTS, INC.					
<b>Principal Place of Business</b> 2850 SOMERSET DRIVE 112 LAUDERDALE LAKES, FL 33311			<b>Mailing Address</b> 2850 SOMERSET DRIVE 112 LAUDERDALE LAKES, FL 33311		
<b>2. Principal Place of Business - No P.O. Box #</b> 2711 Ocean Club Blvd		<b>3. Mailing Address</b> 2711 Ocean Club Blvd			
Suite, Apt. #, etc. #104		Suite, Apt. #, etc. #104		04102007    Chg-P    CR2E034 (12/06)	
City & State Hollywood FL		City & State Hollywood FL		<b>4. FEI Number</b> 03-0419030	
Zip 33019		Country		Applied For Not Applicable	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>			
<b>6. Name and Address of Current Registered Agent</b> TALIC, AZZAT 2850 SOMERSET DRIVE 112 LAUDERDALE LAKES, FL 33311			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) 2711 Ocean Club Blvd #104 City Hollywood FL    Zip Code 33019		
<b>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. I am familiar with, and accept the obligations of the registered agent.</b> SIGNATURE:  DATE: 4-10-07					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TALIC, AZZAT 2850 SOMERSET DRIVE #112 LAUDERDALE LAKES, FL 33311	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	2711 Ocean Club Blvd. #104 Hollywood FL 33019	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>12. I hereby certify that the information supplied with this filing 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 trustee 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 an address, with all other like empowered.</b> SIGNATURE:  DATE: 4-10-07					