2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007
Secretary of State

DOCUMENT# P03000031052

Entity Name: DOLPHIN TALENT MANAGEMENT, INC.

Current Principal Place of Business:

2801 PONCE DE LEON BLVD.
SUITE 270
CORAL GABLES, FL 33134 US

New Principal Place of Business:

804 DOUGLAS ROAD
SUITE 365
CORAL GABLES, FL 33134 US

Current Mailing Address:

2801 PONCE DE LEON BLVD.
SUITE 270
CORAL GABLES, FL 33134 US

New Mailing Address:

804 DOUGLAS ROAD
SUITE 365
CORAL GABLES, FL 33134 US

FEI Number: 33-1051464 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

O'DOWD, WILLIAM H IV
2801 PONCE DE LEON BLVD.
SUITE 270
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

O'DOWD, WILLIAM H IV
804 DOUGLAS ROAD
SUITE 365
CORAL GABLES, FL 33134 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: 05/02/2007
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: O'DOWD, WILLIAM H IV
Address: 2801 PONCE DE LEON BLVD., SUITE 270
City-St-Zip: CORAL GABLES, FL 33134 US

Title: PVST ( ) Delete
Name: O'DOWD, WILLIAM H IV
Address: 2801 PONCE DE LEON BLVD., SUITE 270
City-St-Zip: CORAL GABLES, FL 33134 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: O'DOWD, WILLIAM H IV
Address: 804 DOUGLAS ROAD, SUITE 365
City-St-Zip: CORAL GABLES, FL 33134 US

Title: PVST (X) Change ( ) Addition
Name: O'DOWD, WILLIAM H IV
Address: 804 DOUGLAS ROAD, SUITE 365
City-St-Zip: CORAL GABLES, FL 33134 US

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM H O'DOWD IV P 05/02/2007
Electronic Signature of Signing Officer or Director Date