
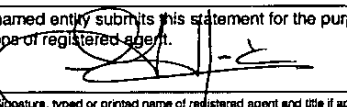
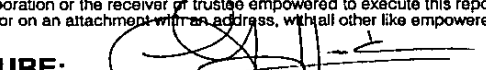


2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000097064				FILED 05 OCT -5 PM 12:51 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
1. Entity Name TALENT ZONE, INC.					
Principal Place of Business 10998 NW 62ND TERRACE MIAMI, FL 33178		Mailing Address 10998 NW 62ND TERRACE MIAMI, FL 33178			
2. Principal Place of Business 2900 NW 109 AVE		3. Mailing Address 2900 NW 109 AVE			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State DORAL FL.		City & State DORAL, FL.		4. FEI Number 20-1314047	
Zip 33172		Country USA		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent HURD, YDABEL 10998 NW 62ND TERRACE MIAMI, FL 33178				7. Name and Address of New Registered Agent Name YDABEL HURD Street Address (P.O. Box Number is Not Acceptable) 2900 NW 109 AVE City DORAL FL Zip Code 33172	
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 registered agent. SIGNATURE  DATE 9/13/05 (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$550.00 Due by October 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD HURD, YDABEL 10998 NE 62ND TERRACE. MIAMI, FL 33178	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			SIGNATURE  DATE 9-13-05 (786) 317-4048		

September 13, 2005

Florida Dept. of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

Re: Talent Zone Inc.
Doc #: P04000097064

Gentlemen:

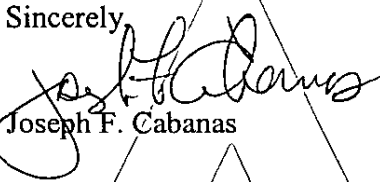
We are the accountants for Talent Zone Inc. and they have asked us to correspond with you concerning their Administrative Dissolution. Please note that our client moved its operation from the address you have on record in early 2005. Furthermore, the Company never received notification of the renewal of their annual report.

Our client is attaching a check in the amount of \$150.00 to cover 2005, and a corporation annual report.

We respectfully request that Talent Zone Inc. be reinstated and any penalties be waived.

Should you have any questions, please do not hesitate to contact me.

Sincerely,


Joseph F. Cabanas