2006 FOR PROFIT CORPORATION

May 18, 2006 08:00 A Secretary of State **ANNUAL REPORT** DOCUMENT # P04000128390 TALAVERA AND SON, INC. Principal Place of Business Mailing Address 17325 NW 78 CT 17325 NW 78 CT HIALEAH, FL 33015 HIALEAH, FL 33015 CR2E034 (11/05) 05152006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1615681 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TALAVERA, JULIO G DO NOT WRITE 17325 NW 78 CT HIALEAH, FL 33015 IN THIS SPACE 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 of required agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 6, 2006 OFFICERS AND DIRECTORS 10. PSTD TITLE TALAVERA, JULIO G NAME 17325 NW 78 CT STREET ADDRESS HIALEAH, FL 33015 CITY-ST-ZIP U00000564776 05/20/06-80091-012 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAMÉ STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TIT! F NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. Thereby 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, witball other like empowered.

SIGNATURE

NAME STREET ADDRESS

ITED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

FILED