

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000131428

Entity Name: TAL FINANCIAL, INC.

FILED
Jan 20, 2006
Secretary of State

Current Principal Place of Business:

3471 NE 163RD ST.
NORTH MIAMI BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

3471 NE 163RD ST.
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

FEI Number: 20-1675856

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEISZ, THOMAS
3500 MYSTIC POINT DR.
APT. 3101
MIAMI, FL 331802585 US

Name and Address of New Registered Agent:

SLATER, JOEL
7751 KINGSPONTE PARKWAY
SUITE 124
ORLANDO, FL 32819 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: JOEL K SLATER

01/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: O () Delete
Name: WEISZ, THOMAS OWNER
Address: 3500 MYSTIC POINT DR. #3101
City-St-Zip: MIAMI, FL 33180 US

Title: O () Delete
Name: KRAMER, LAWRENCE OWNER
Address: 3471 NE 163RD ST
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: WEISZ, THOMAS OWNER
Address: 20201 EAST COUNTRY CLUB DRIVE, APT.#207
City-St-Zip: MIAMI, FL 33180 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: O () Change (X) Addition
Name: SLATER, JOEL K OWNER
Address: 243 W. SABAL PALM PLACE
City-St-Zip: LONGWOOD, FL 32779 US

Title: D () Change (X) Addition
Name: WOLLACH, DAVID DIRECTO
Address: C/O 243 W. SABAL PALM PLACE
City-St-Zip: LONGWOOD, FL 32779 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JOEL K SLATER

VP

01/20/2006

Electronic Signature of Signing Officer or Director

Date