2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 190 6000 104 725

1. Entity Name

TAULE CO HOLDING, INC.



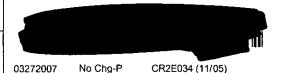
FILED Apr 20, 2007 8:00 am Secretary of State

04-20-2007 90190 001 ***300.00

2901 SOUTH CONGRESS AVE. PALM SPRINGS, FL 33461 US

Mailing Address

2901 SOUTH CONGRESS AVE. PALM SPRINGS, FL 33461 US



DO NOT WRITE IN THIS SPACE

4. FEI Number

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6Name	end Ad:	iress of	Current	:Registered	Agent

TAULE', ALFREDO 2901 SOUTH CONGRESS AVE. PALM SPRINGS, FL 33461

DO NOT WRITE IN THIS SPACE

FALM SPRINGS, FL 33401			IN THIS SPACE					
8. The above the obligation	named entity submits this statement for the poons of registered agent.	urpose of changing its registere	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept			
SIGNATURE								
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Finance Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	TORS						
NAME STREET ADDRESS CITY-ST-ZIP	P ELAINE TAULE' 403 GLENBROOK DR. ATLANTIS, FL 33462				•			
NAME STREET ADDRESS CITY-ST-ZIP	S ALFREDO TAULE' 403 GLENBROOK DR. ATLANTIS, FL 33462		•					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE					
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TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP					·			
12. Thereby o	ertify that the information supplied with this fil	ling does not qualify for the eye	motions co	ntained in Chanter 11	9 Florida Statutes I further certify that the information			

12. I hereby certify that the information supplied with this filling 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 Chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if

SIGNATURE:

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

X04-10-2007 57-97-9894