4.	<del></del>							
'•	FILE	NOW:	<b>FILING</b>	<b>FEE AFTER</b>	MAY 1	<b>IS \$225</b>	.00	

**PROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

P9400002089 (8)

TALLE	R LILO CORPORATION										
Principal Place	of Business	Mailing A	Address				) (48)(48) (48) (81)(48)(48)	101 <b>55</b> 111 <b>55</b> 111 <b>55</b> 11	<b>,</b> 11 <b>5</b> 61 <b>48</b>	48 1 1 P 1   W   W   I   I   W	
	21 TERRACE		N W 7 STREET								
MAMI FL 3	3142		12 MIAMI FL 33126 US			3. Date Incorporated or Qualified					
2. Principal Pla	ce of Business	F erra	2a. Mailing Address			4. FEI Number			Applied For		
Suite, Apt. #	nto.	26 Suite	Apt #, etc.				65-0458620			Not Applicable Additional	
22	, 80.	27	Cara, rya r, car				5. Certificate of Status Desired			Required	
City & State		Oity 8	ß State				Election Campaign Financing     Trust Fund Contribution			<b>0</b> May Be d to Fees	
Zip	Country	Zip		Cou	ntry		8. This corporation has liability for	intang ble tax u			
24	25	29		30	r		Florida Statutes X Yes	□No			
	9. Name and Address of Curre	nt Registered	Agent		81	Name	10. Name and Address of New F	legistered Ag	ent		
NUDT	~ 111013				01			44.41.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4			
	'E, LUCIA I.W. 21ST TERRACE				82	Street Add	ddress (P.O. Box Number is Not Acceptable)				
	FL 33142				83						
title with	7 E 0017E				84	City		····	85 Zıç	p Gode	
						-	oration submits this statement for the pu	FL			
or registere familiar witi	ed agent, or both, in the State of Flo h, and accept the obligations of, Sec Strusse hard or puter harm of representa-	rida. Such char- ction 607.0505,	ge was authorize Florida Statutes.	d by the (	corps	oration's bo	and of directors. Thereby accept the app	omtment as rec	gistered	agent. I am	
12.		ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFF			=	
THILE	PSTV		E DELET€	1 1 1					Change	Addition	
NAME	DUARTE, LUCIA	-		12 N							
STREET ADDRESS	1797 N.W. 21ST TERRACI MIAMI FL 33142	5				ADDRESS 7 750					
CITY - ST - ZIP TITLE	0		[T] DELETE	2 1 1	ITY - S TILE	1 - 211			Change	Addition	
NAME	DUARTE, LUCIA		<b>L</b>	2 2 N						<del></del>	
STREET ADDRESS	1797 N.W. 21ST TERRACI	E		238	TREET	ADORESS					
CrTY-ST-ZiP	MIAMI FL 33142			240	11Y-S	T - ZIF					
TITLE			☐ DELETE	3 1 1					Change	Add-tion	
NAME				3 2 N							
STREET ADDRESS						ADDRESS					
CHTY-ST ZIP TITLE			DELFTE	4 1 1	HY-S HYLF	1-214		<del></del>	Change	☐ Addition	
NAME			<b>D</b>	42 N				_	J		
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP				440	1*Y - S	1-70₽					
TITLE			□ DELETE	5 1	THILE				Change	☐ Addition	
NAME				521	AME						
STREET ADDRESS				538	TREET	RESERVED					
City SI-ZIF			ביין הכובור		)   Y - S	T-ZIP			Change	<b>Γ</b> ∆ddt.on	
TITLE			DEFE1F	6.1					onlange	☐ Addition	
NAME STORET ADDRESS				62 N		ADORESS					
STREET ADDRESS					illy-S	1					
14. Edo hereb	L	d with this filing	is voluntarily furni	shed and	doe:	s not qualify	for the exemption stated in Section 119	1.07(3)(k), Florid	ia Statu	tes. I further	
oath; that	the information indicated on this an Lam an officer or director of the corp Block 12 or Block 13 if changed to	poration or the r	aceiver or trustee	empowe	is tru ered l	ie and accu to execute t	rate and that my signature shall have the this report as required by Chapter 607, F	e same legal eff lorida Statutes;	ect as i and the	r made under at my name	

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LUCIA DUARTE

4/22/96 (305)325-1090

List,\*ene Firence #