


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED  
Sep 23 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000041007 (2)

1. Corporation Name  
TALMA CORP. OF FLORIDA



Principal Place of Business 528 SQUIRE DRIVE W. PALM BEACH FL 33414	Mailing Address 528 SQUIRE DRIVE W. PALM BEACH FL 33414
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2141 10TH AVE NORTH Suite, Apt. #, etc. 22		2a. Mailing Address 26 40 1520 10TH AVE NORTH Suite, Apt. #, etc. 27 #C	
23 LAKE WORTH FL City & State Zip 24 33461		28 LAKE WORTH FL City & State Zip 29 33460	
Country 25 PALM BCH		Country 30 PALM BCH	

3. Date Incorporated or Qualified 05/24/1995	3a. Date of Last Report 04/08/1996
4. FEI Number 65-0584741	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent TALEV, GEORGE V 528 SQUIRE DRIVE W. PALM BEACH FL 33414		10. Name and Address of New Registered Agent 81 Name 82 BLIZABETH TALEV 83 Street Address (P.O. Box Number is Not Acceptable) 528 SQUIRE DRIVE 84 City WEST PALM BEACH FL 85 Zip Code 33414	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Elizabeth Taler EUBABETH TALEV PRESIDENT 7/24/97  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D NAME TALEV, GEORGE V STREET ADDRESS 528 SQUIRE DRIVE CITY-ST-ZIP W. PALM BEACH FL 33414	<input checked="" type="checkbox"/> DELETE	1.1 TITLE PTS 1.2 NAME TALEV, BLIZABETH 1.3 STREET ADDRESS 528 SQUIRE DRIVE 1.4 CITY-ST-ZIP WEST PALM BEACH FL 33414	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	2.1 TITLE VP 2.2 NAME TALEV, ILYA 2.3 STREET ADDRESS 528 SQUIRE DRIVE 2.4 CITY-ST-ZIP WEST PALM BEACH FL 33414	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE Elizabeth Taler

CR2E034 (4/97)