


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 22, 2007 8:00 am**  
**Secretary of State**

01-22-2007 90110 012 \*\*\*150.00

<b>DOCUMENT # P99000075378</b>																	
<b>1. Entity Name</b> NEW TALENT INC.																	
<b>Principal Place of Business</b> 1400 S. BISCAYNE POINT RD. MIAMI BEACH, FL 33141			<b>Mailing Address</b> 8300 W. FLAGLER STREET SUITE 165 MIAMI, FL 33144														
<b>2. Principal Place of Business - No P.O. Box #</b> 8300 W FLAGLER ST Suite, Apt. #, etc. # 165		<b>3. Mailing Address</b> Same.															
<b>City &amp; State</b> Miami FL		<b>City &amp; State</b>		<b>4. FEI Number</b> 65-0943797													
<b>Zip</b> 33144		<b>Country</b> USA		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>													
<b>6. Name and Address of Current Registered Agent</b>  SILVA, FERNANDO 16300 NE 19 AVE C NORTH MIAMI BEACH, FL 33162			<b>7. Name and Address of New Registered Agent</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;"><b>Name</b></td> <td colspan="2">JOSE MARTINEZ</td> </tr> <tr> <td style="padding: 2px;"><b>Street Address (P.O. Box Number is Not Acceptable)</b></td> <td colspan="2">2100 Salzedo ST suite 300</td> </tr> <tr> <td style="padding: 2px;"><b>City</b></td> <td>Coral Gables</td> <td><b>FL</b></td> </tr> <tr> <td style="padding: 2px;"><b>Zip Code</b></td> <td colspan="2">33134</td> </tr> </table>			<b>Name</b>	JOSE MARTINEZ		<b>Street Address (P.O. Box Number is Not Acceptable)</b>	2100 Salzedo ST suite 300		<b>City</b>	Coral Gables	<b>FL</b>	<b>Zip Code</b>	33134	
<b>Name</b>	JOSE MARTINEZ																
<b>Street Address (P.O. Box Number is Not Acceptable)</b>	2100 Salzedo ST suite 300																
<b>City</b>	Coral Gables	<b>FL</b>															
<b>Zip Code</b>	33134																
<b>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.</b> SIGNATURE <u>JOSE MARTINEZ</u>																	
(NOTE: Registered Agent signature required when reinstating)																	
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>			<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>														
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>														
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>PD</b> VELASQUEZ, JOSE M 1400 S. BISCAYNE POINT RD. MIAMI BEACH, FL 33141		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>PD</b> VELASQUEZ JOSE M. 8300 W FLAGLER ST suite 165 Miami FL 33144													
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<b>12. I hereby 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, with all other like empowered.</b>																	
<b>SIGNATURE:</b> <u>Raschel</u>			Date <u>01/11/07</u>														
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																	