

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S73511

FILED
Apr 30, 2008
Secretary of State

Entity Name: TALLARD TECHNOLOGIES, INC.

Current Principal Place of Business:

1935 NW 87TH AVE.
MIAMI, FL 33172 US

New Principal Place of Business:

Current Mailing Address:

1935 NW 87TH AVE.
MIAMI, FL 33172 US

New Mailing Address:

FEI Number: 65-0280193 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GONZALEZ, HUMBERTO
Address: 1935 NW 87TH AVE
City-St-Zip: MIAMI, FL 33172

Title: D () Delete
Name: SETUBAL, PAULO DR.
Address: 1935 NW 87TH AVE
City-St-Zip: MIAMI, FL 33172

Title: DCOO () Delete
Name: FARACHE, SERGIO
Address: 1935 NW 87TH AVE
City-St-Zip: MIAMI, FL 33172

Title: CFTS () Delete
Name: ARCHER DE CASTILHO, EDUARDO
Address: 1935 NW 87TH AVE
City-St-Zip: MIAMI, FL 33172

Title: D () Delete
Name: ARCHER DE CASTILHO, GUILHERME
Address: 1935 NW 87 AVENUE
City-St-Zip: MIAMI, FL 33172

Title: D () Delete
Name: VITA FILHO, CLAUDIO
Address: 1935 NW 87 AVENUE
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: CFTS (X) Change () Addition
Name: DE CASTILHO, EDUARDO A
Address: 1935 NW 87TH AVE
City-St-Zip: MIAMI, FL 33172

Title: D (X) Change () Addition
Name: DE CASTILHO, GUILHERME A
Address: 1935 NW 87 AVENUE
City-St-Zip: MIAMI, FL 33172

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

I hereby certify that the information supplied with this filing does not qualify 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: EDUARDO ARCHER DE CASTILHO

CFTS

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date