FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$96369

(1)

Mailing Address

TALENT BUILDERS INTERNATIONAL, INC.

FILED Apr 30 1997 8:00am Secretary of State



2161 PALM BEACH LAKES BLVD. SUITE 311A WEST PALM BEACH FL 33409		SUITE 311A	2161 PALM BEACH LAKES BLVD. SUITE 311A WEST PALM BEACH FL 33409-6607			Date Incorporated or Qualified		te of Last		
<u> </u>						11/25/1991	U8/0	05/1996		
2. Principal P	lace of Business	2a. Mailing Address				4. FEt Number 65-0382235		h	Applied For	
Sulte, Apt.	#. etc.	Suite, Apt. #, etc			03 0302233			Not Applicable Additional		
22		27	-			5. Certificate of Status Desired		-	Required	
City & Stat 23	6	City & State	├ ┐ '			Election Campaign Financing Trust Fund Contribution				
Zip 24	25 29 30			ountry B. This corporation has liability for intangible tax under s. 199.03. Florida Statutes Yes No			s. 199.032,			
	9. Name and Address of Curr	ent Registered Agent		- I		10. Name and Address of New Re	gistered A	gent		
	SKINS, BARBARA			81	Name					
#3 ⁻ 216			82	Street Add	ldress (P.O. Box Number is Not Acceptable)					
W.	PALM BEACH FL 33409			83						
			ŗ	84	City		FL	85 Zi	p Code	
11. Pursuant office or a agent. I a	to the provisions of Sections 607.00 registered agent, or both, in the Starm familiar with, and accept the obli	i02 and 607.1508, Florida St le of Florida. Such change w gations of, Section 607.0505	atutes, the ab as authorized , Florida State	ove d by utes	-named corp the corpora	poration submits this statement for the p tion's board of directors. Thereby accep	urpose of of the appo	changing pintment a	j its registered as registered	
	Signature, typed or printed name of registered a			Ager	ıl signature requi	red when reinstating)	DATE			
12.	OFFICERS A	ND DIRECTORS	13.	· -		ADDITIONS/CHANGES TO OFFIC				
TITLE	HOSKINS, BARBARA J		1	1.י זודגנ 1. אורני				Change	e 🔲 Addition	
NAME STREET ADDRESS	6207 DIMOND ST		1.2 NA		4000000					
CITY-ST-ZIP	P B GARDENS FL		1.3 STREET ADDRESS 1.4 City - S1-Zip							
TITLE		2111		1- ZIF			Change	e Addition		
NAME			1	2.2 NAME		,				
STREET ADDRESS			2351	REE1 a	ADDRESS					
CITY-ST-ZIP			2 4 CITY - \$T - ZIP		T - 21P					
TITLE	DETETE			LE				Change	e 🔲 Addition	
NAME			3.2 NA							
STREET ADDRESS					ADDRESS	•				
CITY-ST-ZIP TITLE	DELETE			3.4. C(1Y-\$1-Z)P 4.1 T(TLE				Change	e Addition	
NAME		Li Ottere	4. 2 N/						·	
STREET ADDRESS			1		ADDRESS					
CITY-ST-ZIP			4.4 CI			·				
TALE	☐ DELETE			5 1 TITLE				Change	e 🔲 Addition	
NAME			5.2 NA	Μŧ						
STREET ADDRESS			1		ADDRESS					
CITY-ST-ZIP		□ DUCTE	5 4 Gi		I · ZIP			D Char-	n Askalidi	
TITLE		☐ DELETE	61 1II					Change	e	
NAME STREET ADDRESS			6.2 NA		ATITIDE CC					
					ADDRESS					
CITY-ST-ZIP	<u> </u>		6.4 CIT	1-51	- + (1"	· · · · · · · · · · · · · · · · · · ·				

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 eath; 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

Bulan O Horkin Bachana 4.1097 561 697 913