2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006050

FILED Mar 14, 2008 Secretary of State

Entity Name: DELTA EDUCATION, HEALTH, AND CULTURAL INITIATIVE, INC

Entity Nai	me: DELIA	EDUCAT	ION, HEALTH, AND C	ULTURAL INITIATIV	E, INC.			
Current Principal Place of Business:				New Principal Place of Business:				
	183RD STF	REET						
I-14 MIAMI, FL	33055							
Current Mailing Address:				New Mail	New Mailing Address:			
PO BOX 1 MIAMI, FL	65826 331165826			PO BOX 4 MIAMI, FL	42101 331442101	ı		
FEI Number:	: 65-0803129	FEIN	umber Applied For()	FEI Number Not App	olicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:			
PEMBRON	9TH AVENU KE PINES, F	L 33025	US this statement for the p	ourpose of changing	its registere	d office or registered agent, or	both,	
SIGNATU	RE:							
	Electi	onic Sign	ature of Registered Ag	ent		Date		
OFFICER	S AND DIRE	CTORS:		ADDITIO	NS/CHANG	ES TO OFFICERS AND DIRE	CTORS:	
Title: Name: Address: City-St-Zip:	D PELT, ANDR 741 SW 99T PEMBROKE	H AVE	33025	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	D HIGH, GWEI 6615 ELFRE CHARLOTTE	DA ROAD)	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name:	D	()Delete E		Title:	D	(X) Change () Addition		

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREA J. PELT DIR 03/14/2008