


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 06, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000036091</b>		
1. Entity Name <b>JULIO M. DELIVERY, CORP.</b>		
Principal Place of Business <b>13321 SW 28 TER MIAMI, FL 33175</b>	Mailing Address <b>13321 SW 28 TER MIAMI, FL 33175</b>	



05152006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>05-0562468</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  <b>MONTES DE OCA, JULIO E 13321 SW 28 TER MIAMI, FL 33175</b>		<b>DO NOT WRITE IN THIS SPACE</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.		

SIGNATURE *Julio Montes de Oca* - *Julio Montes de Oca* *7-1-06*  
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$550.00  
Due by September 6, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS -	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MONTES DE OCA, JULIO E 13321 SW 28 TER MIAMI, FL 33175
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000000568172  
07/06/06-80011-019 550.00

**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE: *Julio Montes de Oca* *Julio Montes de Oca* *7* *7-1-06*  
(Signature and typed or printed name of signing officer or director) Date Daytime Phone #