

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000126756

Entity Name: DELGADO HOFFMAN, INC.

FILED
Apr 12, 2005
Secretary of State

Current Principal Place of Business:

12827 TAR FLOWER DRIVE
TAMPA, FL 33626

New Principal Place of Business:

7815 N. DALE MABRY HWY
SUITE 207
TAMPA, FL 33614

Current Mailing Address:

12827 TAR FLOWER DRIVE
TAMPA, FL 33626

New Mailing Address:

7815 N. DALE MABRY HWY
SUITE 207
TAMPA, FL 33614

FEI Number: 20-1575170

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOFFMAN, LAURA A
12827 TAR FLOWER DRIVE
TAMPA, FL 33626 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: PSD () Delete
Name: HOFFMAN, DANIEL J
Address: 12827 TAR FLOWER DRIVE
City-St-Zip: TAMPA, FL 33626 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DANIEL J HOFFMAN

PRES

04/12/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date