

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000050594

Entity Name: DELSON INVESTMENTS, INC.

FILED
Aug 17, 2005
Secretary of State

Current Principal Place of Business:

11887 DOUGLAS RD SUITE 102-270
ALPHARETTA, GA 30005

New Principal Place of Business:

Current Mailing Address:

11887 DOUGLAS RD SUITE 102-270
ALPHARETTA, GA 30005

New Mailing Address:

FEI Number: 65-0601693

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEDERER, SONYA
3201 NE 183 STREET
SUITE 1401
NORTH MIAMI BEACH, FL 33160 US

Name and Address of New Registered Agent:

LEDERERER, SONYA
3201 NE 183 STREET
SUITE 1401
NORTH MIAMI BEACH, FL 33160 US

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: SONYA LEDERER

08/17/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VALLEN, ADELE
Address: 5450 LEXINGTON WOODS LANE
City-St-Zip: ALPHARETTA, GA 30005

Title: VP () Delete
Name: LEDERER, SONYA
Address: 3201 NE 183 STREET - SUITE 1401
City-St-Zip: AVENTURA, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ADELE VALLEN

PRES

08/17/2005

Electronic Signature of Signing Officer or Director

Date