

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K22407

**Entity Name:** DELTA PLUS MANAGEMENT SERVICES, INC.**Current Principal Place of Business:**815 N. W. 57TH AVE.  
STE 145  
MIAMI, FL 33126**Current Mailing Address:**1031 MATANZAS AVE  
CORAL GABLES, FL 33146 US**FEI Number:** 65-0049865**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GONZALEZ, PEDRO A. ESQ.  
1200 BRICKELL AVE  
#950  
MIAMI, FL 33131 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:** PEDRO A GONZALEZ**02/27/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PD
Name	DIAZ, ESPERANZA P
Address	1031 MATANZAS AVE.
City-State-Zip:	CORAL GABLES FL 33146

Title	VD
Name	GONZALEZ, CHRISTINA D.
Address	1030 MATANZAS AVE.
City-State-Zip:	CORAL GABLES FL 33146

Title	SD
Name	GONZALEZ, PEDRO A
Address	1030 MATANZAS AVE.
City-State-Zip:	CORAL GABLES FL 33146

Title	TD
Name	DIAZ, HOPE M
Address	1031 MATANZAS AVE.
City-State-Zip:	CORAL GABLES FL 33146

*I hereby 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 all other like empowered.*

**SIGNATURE:** CHRISTINA GONZALEZ**VICE PRESIDENT****02/27/2024**

Electronic Signature of Signing Officer/Director Detail

Date