

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000037527

Entity Name: DELTA HEALTHCARE SERVICES, INC.

Current Principal Place of Business:

736 HOLLYWOOD BLVD
HOLLYWOOD, FL 33019

Current Mailing Address:

P. O. BOX 222025
HOLLYWOOD, FL 33022

FEI Number: 20-2480329

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEKELES, GEORGE
736 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33019 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name DEKELES, GEORGE
Address P. O. BOX 222025
City-State-Zip: HOLLYWOOD FL 33022

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: GEORGE DEKELES

DIRECTOR

03/13/2013

Electronic Signature of Signing Officer/Director Detail

Date