

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 06, 2007 8:00 am
Secretary of State

02-16-2007 90039 043 ***150.00

DOCUMENT # 512388 1. Entity Name DELTA-OMEGA, INC.	
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Principal Place of Business
**3101 N. HIGHWAY A1A
MELBOURNE, FL 32903**

Mailing Address
**3101 N. HIGHWAY A1A
MELBOURNE, FL 32903**

66003955



01082007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1691926	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**TELEMACHOS, NICHOLAS
3101 N. HIGHWAY A1A
MELBOURNE, FL 32903**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when establishing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$350.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	TELEMACHOS, NICHOLAS
STREET ADDRESS	3101 N HWY A1A
CITY-ST-ZIP	INDIALANTIC, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/03/07 (321) 773-9260