

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003174

FILED
Apr 17, 2008
Secretary of State

Entity Name: DELMA LAKESIDE PLAZA IV, CORP.

Current Principal Place of Business:

6301 NW 5TH WAY
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

% DELMA PROPERTIES, INC.
80 MAIDEN LANE, SUITE 2205
NEW YORK, NY 10038

New Mailing Address:

FEI Number: 20-2899589

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PD () Delete
Name: TOROYAN, KEVORK
Address: % 80 MAIDEN LANE, SUITE 2205
City-St-Zip: NEW YORK, NY 10038

Title: V () Delete
Name: MILELLI, ANTHONY
Address: % 80 MAIDEN LANE, SUITE 2205
City-St-Zip: NEW YORK, NY 10038

Title: S () Delete
Name: KALAYJIAN, BARRY
Address: % 80 MAIDEN LANE, SUITE 2205
City-St-Zip: NEW YORK, NY 10038

Title: V () Delete
Name: THOMSON, JAMES
Address: C/O 80 MAIDEN LANE, SUITE 2205
City-St-Zip: NEW YORK, NY 10038

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SVP (X) Change () Addition
Name: MILELLI, ANTHONY
Address: % 80 MAIDEN LANE, SUITE 2205
City-St-Zip: NEW YORK, NY 10038

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

Title: VP (X) Change () Addition
Name: THOMSON, JAMES
Address: C/O 80 MAIDEN LANE, SUITE 2205
City-St-Zip: NEW YORK, NY 10038

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ANTHONY MILELLI

SVP

04/17/2008

Electronic Signature of Signing Officer or Director

_____ Date