

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2007 08:00 A**  
**Secretary of State**

DOCUMENT # F05000007469

1. Entity Name  
DELMAR PROPERTIES GROUP LTD, INC.



Principal Place of Business  
249 BARBADOS DRIVE  
JUPITER, FL 33458

Mailing Address  
249 BARBADOS DRIVE  
JUPITER, FL 33458



04122007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
14-1579044

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

GIAMBONA, DOMINIC  
249 BARBADOS DRIVE  
JUPITER, FL 33458

**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 Dominic Giambona

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

(NOTE: Registered Agent signature required when reinstating)

DATE 4/16/07

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE CP  
NAME GIAMBONA, DOMINIC  
STREET ADDRESS 249 BARBADOS DRIVE  
CITY-ST-ZIP JUPITER, FL 33458

TITLE VCS  
NAME GIAMBONA, LAURA  
STREET ADDRESS 249 BARBADOS DRIVE  
CITY-ST-ZIP JUPITER, FL 33458

TITLE VPD  
NAME POSAVEC, MIRO  
STREET ADDRESS 1002 20TH PLACE  
CITY-ST-ZIP VERO BEACH, FL 32960

TITLE D  
NAME GESTEN, FRED  
STREET ADDRESS 1137 HARRISON STREET  
CITY-ST-ZIP HOLLYWOOD, FL 33019

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

000000748862  
05/17/07-80085-006 150.00

**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: Dominic Giambona  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

561 670-8688