

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # F67232
 1. Entity Name
 DELMAR STEAMSHIP AGENCY, INC.



Principal Place of Business: 1670 N.W. 94TH AVE. MIAMI, FL 33172-2836 US
 Mailing Address: 1670 N.W. 94TH AVE. MIAMI, FL 33172 US

DO NOT WRITE IN THIS SPACE



04252006 No Chg-P CR2E034 (11/05)

4. FEI Number: 59-2162905 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 DAGO, DEL C
 1670 N.W. 94TH AVENUE
 MIAMI, FL 33172

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

110000437612
 05/09/06-80025-015 150.00

10. OFFICERS AND DIRECTORS

| | |
|----------------|-----------------------|
| TITLE | VD |
| NAME | DEL DAGO, ROSA |
| STREET ADDRESS | 1670 N.W. 94TH AVENUE |
| CITY-ST-ZIP | MIAMI, FL 33172 |
| TITLE | STD |
| NAME | DEL DAGO, CARMEN |
| STREET ADDRESS | 1670 N.W. 94TH AVENUE |
| CITY-ST-ZIP | MIAMI, FL 33172 |
| TITLE | PD |
| NAME | DEL DAGO, MANUEL |
| STREET ADDRESS | 1670 N.W. 94TH AVENUE |
| CITY-ST-ZIP | MIAMI, FL 33172 |
| 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: *Carmen Del Dago* 4/25/06 599-1925
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #