

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001281

Entity Name: DEL-JEN, INC.

FILED  
Apr 08, 2009  
Secretary of State

## Current Principal Place of Business:

6700 LAS COLINAS BLVD  
IRVING, TX 75039

## New Principal Place of Business:

879 WEST 190TH STREET  
SUITE 1000  
GARDENA, CA 90248

## Current Mailing Address:

6700 LAS COLINAS BLVD  
IRVING, TX 75039

## New Mailing Address:

879 WEST 190TH STREET  
SUITE 1000  
GARDENA, CA 90248

FEI Number: 95-3242718

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: P ( ) Delete  
Name: SMITH, K.N.  
Address: 6700 LAS COLINAS BOULEVARD  
City-St-Zip: IRVING, TX 75039

Title: CFO ( ) Delete  
Name: JOHNSON, T.A.  
Address: 6700 LAS COLINAS BOULEVARD  
City-St-Zip: IRVING, TX 75039

Title: S ( ) Delete  
Name: HERNANDEZ, CARLOS M  
Address: 6700 LAS COLINAS BOULEVARD  
City-St-Zip: IRVING, TX 75039

Title: AT ( ) Delete  
Name: KEYES, K  
Address: 6700 LAS COLINAS BOULEVARD  
City-St-Zip: IRVING, TX 75039

Title: EVP ( ) Delete  
Name: OLIVER, JANET  
Address: 6700 LAS COLINAS BOULEVARD  
City-St-Zip: IRVING, TX 75039

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SMITH, K N  
Address: 6700 LAS COLINAS BOULEVARD  
City-St-Zip: IRVING, TX 75039

Title: CFO (X) Change ( ) Addition  
Name: JOHNSON, T A  
Address: 6700 LAS COLINAS BOULEVARD  
City-St-Zip: IRVING, TX 75039

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

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

Title: VPT (X) Change ( ) Addition  
Name: OLIVA, J M  
Address: 6700 LAS COLINAS BOULEVARD  
City-St-Zip: IRVING, TX 75039

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: CARLOS M. HERNANDEZ

S

04/08/2009

Electronic Signature of Signing Officer or Director

Date