2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 07, 2005 08:00 AM Secretary of State

	711114777711			7	~ ~	200
DOCUMENT # F9800004849 1. Entity Name GREAT DELIGHT LTD COMPANY					Se	ecretary of Stat
•	AVENUE SUITE 1200 1	ailing Address 50 SE 2ND AVENUE SUITE 120 MAMI, FL 33131	00			
<u> </u>			, * .			
DO NOT WRITE IN THIS SPACE			`F	01072005	No Chg-P	CR2E034 (10/03)
	70 WHATE II			4. FEI Number 52-211	79 <u>35</u>	Applied For Not Applicable
					of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current Regis	stered Agent				Committee of the Committee of a part of X T TO TO MANAGEMENT COMMITTEE OF THE COMMITTEE OF
ROSEN, BORIS 150 SE 2ND AVENUE SUITE #1200 MIAMI, FL 33131			DO NOT WRITE IN THIS SPACE			
	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	d office or registe	red agent, or bo	th, in the State of Fic	orida. I am familiar with, and accept
SIGNATURE_						
	Signature, typod or printed name of registered agent and alie	if applicable, (NOTE, Registered	Agent signature require	d when rainstating)		DATE 110217756
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				.00 May Be led to Fees	02/07/0	5-80038-011 150.00
10.	OFFICERS AND DIRECT PD	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CAMARGO, EDILMA NO. C-6, VILLA DE LAS FUENTES REPUBLIC OF PANAMA,					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD VASQUEZ, MARIXENIA C NO. C-6, VILLA DE LAS FUENTES REPUBLIC OF PANAMA,		And the state of t			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT W	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SI	PACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS		<u>-</u> .				

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

20/1/2005

Daytime Phone #