2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 02, 2006 8:00 am Secretary of State

DOCUMENT # H09020 1. Entity Name DELMAN, INC.					O	2-02-2006 90	0038 011	***150.0	00
Principal Place	of Business	Mailing Address		·	1				
2301 S DEL PRADO BLVD		2301 S DEL PRADO BLVD							
#665 Cape Coral, FL 33990 US		#665 Cape Coral, FL 33990 US		 	 	 			
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01272006	Chg-P	CR2E03	34 (11/05)		
City & State		City & State		4. FEI Number 59-24114	429			plied For t Applicable	
Zip Country		Zìp	Country		5. Certificate of	Status Desired		8.75 Add	
_	6. Name and Address of Current	t Registered Agent		<u> </u>	7. Name and A	ddress of New R		<u> </u>	
COTTRELL	IAMESI			Name					
COTTRELL, JAMES L. 1714 CAPE CORAL PARKWAY CAPE CORAL, FL 33904			Street Address (P.O. Box Number is Not Acceptable)						
				A11				1	
	·			City	<u> </u>		FL	Zip Cod	
	named entity submits this statement fons of registered agent.	or the purpose of changing	its register	ed office or register	red agent, or both,	in the State of Flo	orida. ‡am fa	amiliar with,	and accept
SIGNATURE Signature, typed or printed-name of registered agent and title if applicable. (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 \$5.00 May Be Trust Fund Contribution.									
FILE After Ma	NOW!!! FEE IS \$150.00	9. Election Cam	paign Fina	ncing _ \$5	.00 May Be				
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-76-86 \ 239-712-33