2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H90679

1. Entity Name
DEL MAR CORPORATION



FILED Mar 29, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

1230 E 4TH AVE

HIALEAH, FL 33010 US

P.O. BOX 821515

SOUTH FLORIDA, FL 33082

US



01082008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2609936

Applied For Not Applicat

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

MORLANNE, JESSE E. 1230 E. 4 AVE. SUITE I

HIALEAH, FL 33010

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 accep- |
|----|--|--------------------------------|
| | the obligations of registered agent. | |
| | | |
| | | |

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

| 10. | OFFICERS AND DIRECTORS |
|----------------|------------------------|
| TITLE | PD |
| NAME | MORLANNE, JESSE E. |
| STREET ADDRESS | 1230 E 4TH AVE |
| City-St-Zip | HIALEAN, FL |
| TITLE | SD |
| NAME | MORLANNE, CARMEN M |
| STREET ADDRESS | 1230 E 47H AVE |
| CITY-ST-ZIP | HIALEAH, FL |
| THTLE | VD |
| NAME | MORLANNE, ALEXANDER |
| STREET ADDRESS | 1230 EAST 4TH AVE. |
| CITY-ST-ZIP | HIALEAH, FL 33010 |
| TITLE | VD |
| NAME | MORLANNE, JENNIFER C |
| STREET ADDRESS | 1230 EAST 4TH AVE. |
| Caty-Si-Zip | HIALEAH, FL 33010 |
| TITLE | |
| NAME | |
| STREET ADDRESS | ţ: ' |
| CITY-ST-ZIP | , |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CUPY 63 780 | |

04/12/06-80056-017 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

M-MUML

JESSE R. Morlanne

1/9/06 954 680 3776