

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J47338

FILED
Apr 05, 2006
Secretary of State

Entity Name: JOHN DELPRETE SALES, INC.

Current Principal Place of Business:

29045 OLD MILL EAST
TAVARES, FL 32778

New Principal Place of Business:

816 MYSTIC DRIVE # 301
CAPE CANAVERAL, FL 32920

Current Mailing Address:

29045 OLD MILL EAST
TAVARES, FL 32778 US

New Mailing Address:

816 MYSTIC DRIVE # 301
CAPE CANAVERAL, FL 32920 US

FEI Number: 59-2813322

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELPRETE, JOHN
29045 OLD MIL EAST
TAVARES, FL 32778 US

Name and Address of New Registered Agent:

DELPRETE, JOHN
816 MYSTIC DRIVE # 301
CAPE CANAVERAL, FL 32920 US

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:

04/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: DELPRETE, JOHN,
Address: 29045 OLD MILL EAST
City-St-Zip: TAVARES, FL 32778

Title: V () Delete
Name: DEL PRETE, JOHN
Address: 29045 OLD MILL EAST
City-St-Zip: TAVARES, FL 32778

Title: S () Delete
Name: DELPRETE, JOHN
Address: 29045 OLD MILL EAST
City-St-Zip: TAVARES, FL 32778

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: DELPRETE, JOHN,
Address: 816 MYSTIC DRIVE # 301
City-St-Zip: CAPECANAVERAL, FL 32920

Title: V (X) Change () Addition
Name: DEL PRETE, JOHN
Address: 816 MYSTIC DRIVE # 301
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: S (X) Change () Addition
Name: DELPRETE, JOHN
Address: 816 MYSTIC DRIVE # 301
City-St-Zip: CAPE CANAVERAL, FL 32920

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN G DEL PRETE

PRES

04/05/2006

Electronic Signature of Signing Officer or Director

Date