2007 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Apr 11, 2007 08:00 A Secretary of State **DOCUMENT # J80870** 1, Entity Name DELTA CONSTRUCTION AND DEVELOPMENT, INC. Mailing Address Principal Place of Business 3232 N. TAMIAMI TRAIL 3232 N. TAMIAMI TRAIL BLDG. B BLDG, B SARASOTA, FL 34234 SARASOTA, FL 34234 CR2E034 (11/05) 03302007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2843982 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ELLIS, NICK V DO NOT WRITE 3232 N. TAMIAMI TRAIL BLDG. B IN THIS SPACE SARASOTA, FL 34234 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 accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title it applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE ELLIS, NICK V JR NAME U00000700458 04/20/07-80014-025 150.00 STREET ADDRESS 3232 N TAMIAMI TR BLDG B CITY-ST-ZIP SARASOTA, FL 34234 TITLE FLUS, RICHARD V NAME STREET ADDRESS 3232 N TAMIAMI TR BLDG B CITY-ST-ZIP SARASOTA, FL 34234 TITLE ELLIS, MILDRED P NAME 3232 N TAMIAMI TR BLDG B STREET ADDRESS DO NOT WRITE CITY-ST-ZIP SARASOTA, FL 34234 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

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 if changed, or on an attachment with an address, with all other like empowered.

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE

4/6/07 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO