2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J99460

FILED Jul 06, 2005 Secretary of State

Entity Name: DELAWARE FIVE ENTERPRISES INC.

Current P	rincipal Place	of Business:	New Principal Place	of Business:
	PHY HILLS DF AS, NV 89134	RIVE		
Current M	lailing Addres	ss:	New Mailing Address	s:
	PHY HILLS DF AS, NV 89134	RIVE		
FEI Number	: 86-0821223	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	Current Registered Agent:	Name and Address o	of New Registered Agent:
1200 SOU	ORATION SYS TH PINE ISLAI ION, FL 33324	ND ROAD		
1200 SOU PLANTAT The above in the State	TH PINE ISLA ION, FL 33324 named entity se of Florida.	ND ROAD I US	purpose of changing its registered	d office or registered agent, or both,
1200 SOU PLANTAT The above	TH PINE ISLAI ION, FL 33324 named entity se of Florida. RE:	ND ROAD I US		d office or registered agent, or both, Date
1200 SOU PLANTAT The above in the State SIGNATUI	TH PINE ISLAI ION, FL 33324 named entity se of Florida. RE: Electror	ND ROAD I US submits this statement for the	ent	
1200 SOU PLANTAT The above in the State SIGNATUE In accordan Election Cal	TH PINE ISLAI ION, FL 33324 named entity se of Florida. RE: Electror	ND ROAD I US submits this statement for the labeled and the labeled area of Registered Ag 3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ent ot receive the prior notice.	
1200 SOU PLANTAT The above in the State SIGNATUE In accordan Election Cal	TH PINE ISLAI ION, FL 33324 e named entity se of Florida. RE: Electror ce with s. 607.19 mpaign Financing S AND DIREC	ND ROAD US submits this statement for the price Signature of Registered Ag 3(2)(b), F.S., the corporation did nog Trust Fund Contribution (). TORS: Delete NY HILLS DRIVE	ent ot receive the prior notice.	Date

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LARRY LATHAM S 07/06/2005