


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2008 08:00 A
Secretary of State

DOCUMENT # L03000056982					
1. Entity Name DELTA HOLDINGS LLC					
Principal Place of Business 109 BROOK WOODE AVENUE ROYAL PALM BEACH, FL 33411			Mailing Address 195 SUNFLOWER CIRCLE ROYAL PALM BEACH, FL 33411		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 75-3142876	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent MAYER, ZOLTAN J MGRM 109 BROOK WOODE AVENUE ROYAL PALM BEACH, FL 33411			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MAYER, ZOLTAN JOE 109 BROOK WOODE AVE ROYAL PALM BEACH, FL 33411		TITLE NAME STREET ADDRESS CITY-ST-ZIP	04/30/08-80047-022 138.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RALLO, FRANK J 195 SUNFLOWER CIR ROYAL PALM BEACH, FL 33411		TITLE NAME STREET ADDRESS CITY-ST-ZIP	04/30/08-80047-022 138.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RALLO, FRANK J 195 SUNFLOWER CIR ROYAL PALM BEACH, FL 33411		TITLE NAME STREET ADDRESS CITY-ST-ZIP	04/30/08-80047-022 138.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RALLO, FRANK J 195 SUNFLOWER CIR ROYAL PALM BEACH, FL 33411		TITLE NAME STREET ADDRESS CITY-ST-ZIP	04/30/08-80047-022 138.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RALLO, FRANK J 195 SUNFLOWER CIR ROYAL PALM BEACH, FL 33411		TITLE NAME STREET ADDRESS CITY-ST-ZIP	04/30/08-80047-022 138.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RALLO, FRANK J 195 SUNFLOWER CIR ROYAL PALM BEACH, FL 33411		TITLE NAME STREET ADDRESS CITY-ST-ZIP	04/30/08-80047-022 138.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RALLO, FRANK J 195 SUNFLOWER CIR ROYAL PALM BEACH, FL 33411		TITLE NAME STREET ADDRESS CITY-ST-ZIP	04/30/08-80047-022 138.75	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <i>Frank J. Rallo</i>			4/14/08 x 561 308-6677		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		