

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90737 006 ***150.00

DOCUMENT # P00000034563 1. Entity Name DELTA BUILDING MAINTENANCE & MANAGEMENT CORP.					
Principal Place of Business 5721 NW 55 LANE TAMARAC, FL 33319				Mailing Address 5721 NW 55 LANE TAMARAC, FL 33319	
2. Principal Place of Business 6047 Kimberly Blvd Suite # W City & State: N. Lauderdale FL Zip: 33067 Country: USA		3. Mailing Address P.O. Box 590577 Suite, Apt. #, etc. City & State: Tamarac FL Zip: 33359 Country: USA		<div style="background-color: black; width: 100px; height: 20px; margin: 0 auto;"></div> <input checked="" type="checkbox"/> CHECK HERE IF MAKING CHANGES.	
4. FEI Number 65-1083933		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent MARTINEZ, JUAN J 5721 NW 55 LANE TAMARAC, FL 33319			7. Name and Address of New Registered Agent Name: Marcelo L. Martinez Street Address (P.O. Box Number is Not Acceptable): 5721 NW 55th Lane City: Tamarac FL Zip Code: 33319		
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: <small>Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when resigning)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$650.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MARTINEZ, JUAN J 5721 NW 55 LANE TAMARAC, FL 33319	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Marcelo L. Martinez 5721 NW 55th Ln Tamarac FL 33319	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JUAN J. Martinez 5721 NW 55th Ln Tamarac FL 33319	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JUAN J. Martinez 5721 NW 55th Ln Tamarac FL 33319	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify 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 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.					
SIGNATURE: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

CR2034 (10/02)