


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000083936	
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1. Entity Name
DALTAC INC

Principal Place of Business
10750 NW 66 STREET #307
MIAMI, FL 33178

Mailing Address
10750 NW 66 STREET #307
MIAMI, FL 33178

DO NOT WRITE IN THIS SPACE

03192004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1045953	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

IBARRA-RIVERA, JOSE A
10750 NW 66 STREET #307
MIAMI, FL 33178

**DO NOT WRITE
IN THIS SPACE**

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000125974
04/23/04-80015-012 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D IBARRA-RIVERA, JOSE A 10750 NW 66 STREET #307 MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D IBARRA-RIVERA, VIRGINIA D 10750 NW 66 STREET #307 MIAMI, FL 33178
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**DO NOT WRITE
IN THIS SPACE**

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:

V.D. Ibarra-Rivera - V.D. IBARRA-RIVERA Apr. 21/04 305-468-8468
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #