

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000061498

FILED  
Apr 24, 2006  
Secretary of State

Entity Name: DELFAB, INC.

## Current Principal Place of Business:

4111 LOUIS AVENUE  
UNIT 38  
HOLIDAY, FL 34691

## New Principal Place of Business:

## Current Mailing Address:

4111 LOUIS AVENUE  
UNIT 38  
HOLIDAY, FL 34691

## New Mailing Address:

FEI Number: 59-3727949

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DESLAURIERS, ROLAND B  
38791 U.S. HWY 19 N.  
#801  
TARPON SPRINGS, FL 34689 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PROD ( ) Delete  
Name: DESLAURIERS, ROLAND B  
Address: 38791 U.S. HWY 19 N. LOT 801  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: MKT ( ) Delete  
Name: DESLAURIERS, HARVEY E  
Address: 3277 HIBISCUS DR  
City-St-Zip: PALM HARBOR, FL 34684

Title: FIN ( ) Delete  
Name: DESLAURIERS, RACHAEL A  
Address: 3277 HIBISCUS DRIVE  
City-St-Zip: PALM HARBOR, FL 34684

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: RACHEL A. DESLAURIERS

FIN

04/24/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date