## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000101023

Entity Name: DEL PLATA CONSTRUCTION COMPANY, INC.

FILED Jul 10, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3712 GATTIN WOODS DR 13220 OULTON CIRCLE ORLANDO, FL 32812 ORLANDO, FL 32832

**Current Mailing Address: New Mailing Address:** 

3712 GATTIN WOODS DR 13220 OULTON CIRCLE ORLANDO, FL 32812 ORLANDO, FL 32832

FEI Number: 03-0425549 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FAILLA, LAURALI FAILLA, LAURALI 3712 GATTLIN WOODS DRIVE 13220 OULTON CIRCLE ORLANDO, FL 32812 ORLANDO, FL 32832

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: LAURALI FAILLA 07/10/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete (X) Change ( ) Addition FAILLA, LAURALI Name: Name: FAILLA, LAURALI 3712 GATTLIN WOODS DR Address: 13220 OULTON CIRCLE Address:

City-St-Zip: ORLANDO, FL 32812 City-St-Zip: ORLANDO, FL 32832

Title: Title: (X) Change ( ) Addition () Delete FAILLA, SEBASTIAN Name: Name: FAILLA, SEBASTIAN 3712 GATTLIN WOODS DR Address: 13220 OULTON CIRCLE Address: ORLANDO, FL 32812 ORLANDO, FL 32832 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: LAURALI FAILLA MRS 07/10/2009

Electronic Signature of Signing Officer or Director

Date