

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000062100

Entity Name: DEL PERICHI, PA

FILED
Mar 26, 2005
Secretary of State

Current Principal Place of Business:

14855 BRECKNESS PLACE
MIAMI LAKES, FL 33016-149

New Principal Place of Business:

14855 BRECKNESS PLACE
MIAMI LAKES, FL 33016

Current Mailing Address:

14855 BRECKNESS PLACE
MIAMI LAKES, FL 33016-149

New Mailing Address:

14855 BRECKNESS PLACE
MIAMI LAKES, FL 33016

FEI Number: 82-0549182

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERICHI, DEL
14855 BRECKNESS PLACE
MIAMI LAKES, FL 33016-149 US

Name and Address of New Registered Agent:

PERICHI, DEL
14855 BRECKNESS PLACE
MIAMI LAKES, FL 33016 US

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: DELFIN PERICHI

03/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PERICHI, DEL
Address: 14855 BRECKNESS PLACE
City-St-Zip: MIAMI LAKES, FL 33016-149

Title: SECT () Delete
Name: PERICHI, DEL
Address: 14855 BRECKNESS PLACE
City-St-Zip: MIAMI LAKES, FL 33016-149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PERICHI, DEL
Address: 14855 BRECKNESS PLACE
City-St-Zip: MIAMI LAKES, FL 33016

Title: SECT (X) Change () Addition
Name: PERICHI, DEL
Address: 14855 BRECKNESS PLACE
City-St-Zip: MIAMI LAKES, FL 33016

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DELFIN PERICHI

PA

03/26/2005

Electronic Signature of Signing Officer or Director

Date