2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000083320

Entity Name: DL TECHNOLOGIES INC.

FILED Mar 22, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 119 SOUTH GOLFVIEW ROAD SUITE 6 LAKE WORTH, FL 33460 **Current Mailing Address: New Mailing Address:** 119 SOUTH GOLFVIEW ROAD SUITE 6 LAKE WORTH, FL 33460 FEI Number: 41-2061113 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: LY, DANIEL 119 S. GOLFVIEW RD., STE 6 LAKE WORTH, FL 33460 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete Title: () Change () Addition Name: LY, DANIEL L Name: 119 S GOLFVIEW ROAD, SUITE 6 Address: Address: City-St-Zip: LAKE WORTH, FL 33460 US City-St-Zip: Title: COO Title: () Delete () Change () Addition Name: TRUEMAN, JOHN R Name: 320 LAMBERT AVENUE Address: Address: FLAGLER BEACH, FL 32136 US City-St-Zip: City-St-Zip: () Delete Title: (X) Change () Addition Title: FVP FVP ANNIE, JOHNSON L JOHNSON, ANNIE L Name: Name: 6 BAY AVENUE 6 BAY AVENUE Address: Address: City-St-Zip: BLOOMFIELD, NJ 07003 US City-St-Zip: BLOOMFIELD, NJ 07003 US Title: () Delete Title: () Change (X) Addition LY, CHARLES L Name: Name: Address: Address: 8202 NW 91ST AVENUE City-St-Zip: City-St-Zip: TAMARAC, FL 33321 Title: Title: () Change (X) Addition () Delete JOHNSON, MATTHEW Name: Name: Address: Address: 6 BAY AVENUE City-St-Zip: City-St-Zip: BLOOMFIELD, NJ 07003

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: DANIEL LY CEO 03/22/2005