


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000094105 1. Entity Name DELTA PLATING, CO.	
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Principal Place of Business
3060 N.W. 23RD TERRACE
OAKLAND PARK, FL 33311

Mailing Address
3060 N.W. 23RD TERRACE
OAKLAND PARK, FL 33311



04262004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 42-1548980	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

REYNOSO, FELIX
3060 N.W. 23RD TERRACE
OAKLAND PARK, FL 33311

**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**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	REYNOSO, FELIX
STREET ADDRESS	3060 N.W. 23RD TERRACE
CITY-ST-ZIP	OAKLAND PARK, FL 33311
TITLE	VD
NAME	REYNOSO, RAPHAEL
STREET ADDRESS	3060 N.W. 23RD TERRACE
CITY-ST-ZIP	OAKLAND PARK, FL 33311
TITLE	SD
NAME	REYNOSO, ESTELITA
STREET ADDRESS	3060 N.W. 23RD TERRACE
CITY-ST-ZIP	OAKLAND PARK, FL 33311
TITLE	TD
NAME	REYNOSO, VICTOR
STREET ADDRESS	3060 N.W. 23RD TERRACE
CITY-ST-ZIP	OAKLAND PARK, FL 33311
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/28/04-80019-013 150.00

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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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-26-04

Date

Daytime Phone #