

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000005322

Entity Name: DELPHI VENTURES, INC.

FILED
Aug 11, 2005
Secretary of State

Current Principal Place of Business:

15645 COLLINS AVENUE
SUITE # 201
SUNNY ISLES, FL 33160 US

Current Mailing Address:

PO BOX 591193
MIAMI, FL 33159 US

New Principal Place of Business:

15645 COLLINS AVENUE
SUITE 201
SUNNY ISLES, FL 33160 US

New Mailing Address:

15645 COLLINS AVENUE
SUITE 201
MIAMI, FL 33160 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAZ, M
PO BOX 591193
MIAMI, FL 33159 US

Name and Address of New Registered Agent:

DIAZ, M
15645 COLLINS AVENUE
SUITE 201
MIAMI, FL 33160 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: M DIAZ

08/11/2005

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:

Title: P/S () Delete
Name: DIAZ, M
Address: PO BOX 591193
City-St-Zip: MIAMI, FL 33160 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/S (X) Change () Addition
Name: DIAZ, M
Address: 15645 COLLINS AVENUE SUITE 201
City-St-Zip: MIAMI, FL 33160 US

Title: VP/T () Change (X) Addition
Name: DIAZ, L
Address: 15645 COLLINS AVENUE SUITE 201
City-St-Zip: MIAMI, FL 33160 US

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: L DIAZ

VP

08/11/2005

Electronic Signature of Signing Officer or Director

Date