

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P03000034922

1. Entity Name
DALMA AND ASSOCIATES, INC.



**FILED
Apr 18, 2005 8:00 am
Secretary of State**

04-18-2005 90546 022 ***150.00

20035379



04152005 Chg-P- CR2E034 (10/03)

Principal Place of Business 737 CREEK WATER TERRACE APT 209 LAKE MARY, FL 32746	Mailing Address 737 CREEK WATER TERRACE APT 209 LAKE MARY, FL 32746
2. Principal Place of Business 4120 CHRISTA COURT Suite, Apt. #, etc.	3. Mailing Address 4120 CHRISTA COURT Suite, Apt. #, etc.
City & State WINTER PARK Zip 32792	City & State WINTER PARK Zip 32792
Country SEMINOLE	Country SEMINOLE

4. FEI Number 14-1875174	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

ACOSTA, MARILYN
737 CREEK WATER TERRACE APT 209
LAKE MARY, FL 32746

Name ACOSTA, MARILYN
Street Address (P.O. Box Number is Not Acceptable) 4120 CHRISTA COURT
City WINTER PARK
FL 32792

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 *Janet Acosta*

(NOTE: Registered Agent signature required when reinstating)

DATE *4/15/05*

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																												
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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: *Janet Acosta*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/05 407-271-9002
Date Daytime Phone #