

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000040229

FILED
Apr 13, 2005
Secretary of State

Entity Name: P-DELTA ENGINEERING SERVICES, INC.

Current Principal Place of Business:

15612 SW 109 TERRACE
MIAMI, FL 33196

New Principal Place of Business:

Current Mailing Address:

15612 SW 109 TERRACE
MIAMI, FL 33196

New Mailing Address:

FEI Number: 51-0458286

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMBOGLIA, ORESTE
15612 SW 109 TERRACE
MIAMI, FL 33196 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: LAMBOGLIA, ORESTE
Address: 11757 SW 132 PLACE
City-St-Zip: MIAMI, FL 33186

Title: VD () Delete
Name: ANGEL, LILIANA
Address: 11757 SW 132 PLACE
City-St-Zip: MIAMI, FL 33186

Title: CD (X) Delete
Name: HAMID, MIAN
Address: 11757 SW 132 PLACE
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LAMBOGLIA, ORESTE
Address: 15612 SW 109 TERRACE
City-St-Zip: MIAMI, FL 33196

Title: VD (X) Change () Addition
Name: ANGEL, LILIANA
Address: 15612 SW 109 TERRACE
City-St-Zip: MIAMI, FL 33196

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ORESTE LAMBOGLIA

PD

04/13/2005

Electronic Signature of Signing Officer or Director

_____ Date