

2004 FOR PROFIT CORPORATION ANNUAL REPORT

APPROVED
AND
FILED

04 NOV -9 PM 1:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT



09202004 Chg-P CR2E034 (10/03)

4. FEI Number 200015471 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DELFIACCO, MARIO
349 BERNARD AVE
LONGWOOD, FL 32750

Name Angela Delfiaco
Street Address (P.O. Box Number is Not Acceptable)
300 Sheoah Blvd Ste 707
Winter Springs FL 32708

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 *Angela Delfiaco* (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

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

10. OFFICERS AND DIRECTORS

TITLE P
NAME DELFIACCO, MARIO
STREET ADDRESS 349 BERNARD AVE
CITY-ST-ZIP LONGWOOD, FL 32750

TITLE VP
NAME DELFIACCO, FRANCES E
STREET ADDRESS 349 BERNARD AVE
CITY-ST-ZIP LONGWOOD, FL 32750

TITLE Sec.
NAME Angela Delfiaco
STREET ADDRESS 300 Sheoah Blvd Suite 707
CITY-ST-ZIP Winter Springs FL 32708

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
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CITY-ST-ZIP
000041878860
10/14/04--01027--005 **150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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 information.

SIGNATURE: *Angela Delfiaco*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-6-04
Date Daytime Phone #

PS 282

MDEL CONSULTING Inc.

4602 West Erie Street
Chandler AZ. 85226
480-699-8341

October 6, 2004

Florida Department of State
Division of Corporations
P.O.Box 6327
Tallahassee, Florida 32314

To Whom It May Concern

I Frances Delfiaccio V.P. of Mdel Construction Inc. just received paper work on our 2004 annual report. On April 2, 2004 we relocated to Chandler Arizona and just received this report and monies due with the relocation mail has been handled back and forth and we just received this notice: ~~Along with our check for \$150.00~~ I am also enclosing the envelope showing it went back to Longwood, Fl on 9/24/04 which then takes a week for it to be mailed to me in Arizona. If you have any further questions please call us at 480-699-8341 or write us at the Arizona office at 4602 West Erie St. Chandler Arizona 85226.



Thank you

Frances Delfiaccio
V.P. Mdel Construction Inc.
4602 W. Erie St.
Chandler Az 85226
480-699-8341