2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 13, 2006 08:00 AM Secretary of State

2/7/06

1. Entity Name	MENT # P0300005218 DLDINGS, INC.	2	} - - -			·	y or state	
Principal Place 4821 GEORG TAMPA, FL 3	E ROAD	leiting Address 1821 GEORGE ROAD 'AMPA, FL 33634						
DO NOT WRITE IN THIS S			PACE		02072006	02072008 No Chg-P		
						of Status Desired	CO 75 Additional	
6. Name and Address of Current Registered Agent MALKI, MILAD 4821 GEORGE ROAD TAMPA, FL 33634				DO NOT WRITE IN THIS SPACE				
6. The above the obligate	named entity submits this statement for the ions of registered agent. Signature, typed or printed name of registered agent and this				pisterød agent, or bo routred when retastating)		I am familiar with, and accept	
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	9. Election Campa Trust Fund Car			\$5.00 May Be Added to Fees	11000000425	9697 113-003 150.00	
TO. THE MAME STREET ADDRESS CITY-ST-ZIP	P MALKI, MILAD 165 NINA WAY OLDSMAR, FL 34677	CTORS				02722780-000	113-003 130,00	
TITLE NAME STREET ADDRESS CITY-57-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIT						NOT WR		
tifle Name Sireet address City-SI-Zip					IN	THIS SPA	CE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME SIREET ADDRESS CITY-ST-ZIP								
12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 eath; 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 AND WEED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR