2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000089738

Title:

Name:

Address:

City-St-Zip:

VS

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CZARNECKI, LOIS R

BOCA RATON, FL 33432

282 FAN PALM RD

Entity Name: DELTENNIUM CORPORATION

FILED Apr 26, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: MIZNER PARK OFFICE TOWER 225 NE MIZNER BLVD SUITE 300 BOCA RATON, FL 33432 **Current Mailing Address: New Mailing Address:** MIZNER PARK OFFICE TOWER 225 NE MIZNER BLVD SUITE 300 BOCA RATON, FL 33432 FEI Number: 93-1256089 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CZARNECKI, GERALD M MIZNER PARK OFFICE TOWER 225 NE MIZNER BLVD SUITE 300 BOCA RATON, FL 33432 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CCEO () Delete Title: () Change () Addition CZARNECKI, GERALD M Name: Name: 282 FAN PALM RD Address: Address: City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: Title: 0000 Title: 0000 () Delete (X) Change () Addition FOLWELL, JEAN Name: Name: FOLWELL, JEAN 47 ORIOLE LANE 7368 LOGSDEN ROAD Address: Address: LAKE OSWEGO, OR LOGSDEN, OR 97357 City-St-Zip: 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JEAN FOLWELL 0000 04/26/2004

() Change () Addition