

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000079278

FILED
May 27, 2007
Secretary of State

Entity Name: DELTONA CREDIT CONSULTANTS, INC.

Current Principal Place of Business:

2617 COURTLAND BLVD.
DELTONA, FL 32738

New Principal Place of Business:

2430 PINE TREE ACRES LANE
DELTONA, FL 32738

Current Mailing Address:

PO BOX 390966
DELTONA, FL 32739

New Mailing Address:

FEI Number: 14-1911322

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUQUE, MYRAH
2617 COURTLAND BLVD.
DELTONA, FL 32738 US

Name and Address of New Registered Agent:

DUQUE, MYRAH
2430 PINE TREE ACRES LANE
DELTONA, FL 32738 US

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: MYRAH DUQUE

05/27/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DUQUE, MYRAH M
Address: 2617 COURTLAND BLVD.
City-St-Zip: DELTONA, FL 32738

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DUQUE, MYRAH M
Address: 2430 PINE TREE ACRES LANE
City-St-Zip: DELTONA, FL 32738

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MYRAH DUQUE

P

05/27/2007

Electronic Signature of Signing Officer or Director

Date