

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000138148

**FILED**  
**Feb 05, 2007**  
**Secretary of State**

**Entity Name:** DELTA LIMITED CORPORATION

**Current Principal Place of Business:**

8312 NW SOUTH RIVER DRIVE  
MIAMI, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 669334  
MIAMI, FL 33166

**New Mailing Address:**

**FEI Number:** 42-1650097

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GARCIA, JORGE  
PO BOX 669334  
MIAMI, FL 33166 US

**Name and Address of New Registered Agent:**

GAULION, ALBERTO  
8312 NW SOUTH RIVER DRIVE  
MIAMI, FL 33166 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:** ALBERTO GAULION

02/05/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P ( ) Delete  
**Name:** GARCIA, JORGE  
**Address:** 8312 NW SOUTH RIVER DRIVE  
**City-St-Zip:** MIAMI, FL 33166

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** P (X) Change ( ) Addition  
**Name:** GAULION, ALBERTO  
**Address:** 8312 NW SOUTH RIVER DRIVE  
**City-St-Zip:** MIAMI, FL 33166

I hereby certify that the information supplied with this filing does not qualify for the 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:** ALBERTO GAULION

P

02/05/2007

Electronic Signature of Signing Officer or Director

Date