2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000060075

Entity Name: DELMAR CONSULTANTS CORP.

FILED May 01, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
7690 NW	<u>-</u>	US	•		
Current M	lailing Addres	s:	New Mailing Address	s:	
7690 NW PARKLAN	70 AVE ID, FL 33067	US			
FEI Number	: 20-2739689	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address o	f New Registered Agent:	
7690 NW	DOLORES S 70 AVE ID, FL 33067	US			
	e named entity : e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () APRAEZ, DOLO 7690 NW 70 AV PARKLAND, FL	/E	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () CORREDOR, N 7690 NW 70 AN PARKLAND, FL	/E	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S/TR () CORREDOR, M 7690 70 AVE PARKLAND, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: DOLORES S APRAEZ P 05/01/2008