

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000138685

Entity Name: DELPHICWAVE INC.

FILED
Apr 18, 2006
Secretary of State

Current Principal Place of Business:

3208 NE 8TH COURT
POMPANO BEACH, FL 33062

New Principal Place of Business:

3208 NE 8TH COURT
UNIT E
POMPANO BEACH, FL 33062

Current Mailing Address:

3208 NE 8TH COURT
POMPANO BEACH, FL 33062

New Mailing Address:

3208 NE 8TH COURT
UNIT E
POMPANO BEACH, FL 33062

FEI Number: 20-3618783

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARIAST, PAMELA ANN
3208 NE 8TH COURT
POMPANO BEACH, FL 33062 US

Name and Address of New Registered Agent:

MARIAST, PAMELA ANN
3208 NE 8TH COURT
UNIT E
POMPANO BEACH, FL 33062 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:

04/18/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTSD () Delete
Name: MARIAST, PAMELA ANN
Address: 3208 NE 8TH COURT
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: MARIAST, PAMELA ANN
Address: 3208 NE 8TH COURT UNIT E
City-St-Zip: POMPANO BEACH, FL 33062

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: PAMELA ANN MARIAST

PTSD

04/18/2006

Electronic Signature of Signing Officer or Director

Date