2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2007
Secretary of State

DOCUMENT# P06000010876

Entity Name: DELTA TECHNOLOGY SYSTEMS INC.

Current Principal Place of Business:

1779 CONCERT RD.
DELTONA, FL 32738

New Principal Place of Business:

Current Mailing Address:

1779 CONCERT RD.
DELTONA, FL 32738

New Mailing Address:

FEI Number: 74-3205370 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GALARZA, JULIO
1779 CONCERT RD.
DELTONA, FL 32738 US

Name and Address of New Registered Agent:

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:

Title: P ( ) Delete
Name: GALARZA, JULIO
Address: 1779 CONCERT RD.
City-St-Zip: DELTONA, FL 32738

Title: V ( ) Delete
Name: CLARK, CHRISTOFER
Address: 315 LAKE CRESENT DR.
City-St-Zip: DEBARY, FL 32713

Title: S ( ) Delete
Name: JARVIS, ROBERT F.
Address: 2016 WOODLAND DR.
City-St-Zip: NEW SMYRNA BEACH, FL 32618

Title: T (X) Delete
Name: CAMUY, EDWIN
Address: 2662 JULIET DR.
City-St-Zip: DELTONA, FL 32738

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change ( ) Addition
Name: POMALES, MISEAL
Address: 1779 CONCERT ROAD
City-St-Zip: DELTONA, FL 32738

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JULIO GALARZA P 02/20/2007

Electronic Signature of Signing Officer or Director Date