

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000052509

FILED
Apr 23, 2007
Secretary of State

Entity Name: HOR DELIVERY CORPORATION

Current Principal Place of Business:

3825 SW 17TH AVENIDA
CAPE CORAL, FL 33914 US

New Principal Place of Business:

Current Mailing Address:

3825 SW 17TH AVENIDA
CAPE CORAL, FL 33914 US

New Mailing Address:

FEI Number: 20-4683379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISABE, ISIS
9540 NW 18 AVE
PLANTATION, FL 33322 US

Name and Address of New Registered Agent:

OROZCO, HUMBERTO
3825 SW 17TH AVE
CAPE CORAL, FL 33914 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: OROZCO HUMBERTO

04/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OROZCO, HUMBERTO SR
Address: 3825 SW 17TH AVE
City-St-Zip: CAPE CORAL, FL 33914 US

Title: VP () Delete
Name: OROZCO, KARLA SRA
Address: 3825 SW 17 AVE
City-St-Zip: CAPE CORAL, FL 33914 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: HUMBERTO OROZCO

P

04/23/2007

Electronic Signature of Signing Officer or Director

Date