

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000043153

Entity Name: DELICA ENTERPRISES, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

812 NW 24TH ST.
WILTON MANORS, FL 33311 US

New Principal Place of Business:

1042 NW 9TH AVE
FT LAUDERDALE, FL 33311 US

Current Mailing Address:

812 NW 24TH ST.
WILTON MANORS, FL 33311 US

New Mailing Address:

FEI Number: 20-8853648 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VINCENT, ARTHUR ESQ.
CUMBERLAND BUILDING
800 E. BROWARD BOULEVARD, SUITE 607
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

DELICA, FRANCIANE
812 NW 24TH ST
WILTON MANORS, FL 33311 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: DELICA FRANCIANE

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DELICA, ROOSEWELT
Address: 812 NW 24TH STREET
City-St-Zip: WILTON MANORS, FL 33311 US

Title: VPD () Delete
Name: DELICA, FRANCIANE J
Address: 812 NW 24TH STREET
City-St-Zip: WILTON MANORS, FL 33311 US

Title: VP () Delete
Name: DELICA, ROOSSELY
Address: 42 LOURDES AVENUE, #2
City-St-Zip: JAMAICA PLAIN, MA 02130 US

Title: S () Delete
Name: DELICA, FAYOLA
Address: 7608 WATERFORD LAKES DRIVE, APT. 1818
City-St-Zip: CHARLOTTE, NC 28210 US

Title: T () Delete
Name: DELICA, SUZANNE
Address: 507 N.W. 39TH ROAD, #231
City-St-Zip: GAINESVILLE, FL 32607 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: DELICA FRANCIANE

VPD

04/30/2009

Electronic Signature of Signing Officer or Director

Date