

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000043153

FILED  
Apr 16, 2010  
Secretary of State

Entity Name: DELICA ENTERPRISES, INC.

**Current Principal Place of Business:**

1042 NW 9TH AVE  
FT LAUDERDALE, FL 33311 US

**New Principal Place of Business:**

**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:**

DELICA, FRANCIANE  
812 NW 24TH ST  
WILTON MANORS, FL 33311 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: PD  
Name: DELICA, ROOSEWELT  
Address: 812 NW 24TH STREET  
City-St-Zip: WILTON MANORS, FL 33311 US

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

Title: VP  
Name: DELICA, ROOSSELY  
Address: 812 NW 24TH STREET  
City-St-Zip: WILTON MANORS, MA 33311 US

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

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

I hereby 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 all other like empowered.

SIGNATURE: ROOSSELY DELICA

VP

04/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date