


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 24, 2008 8:00 am**  
**Secretary of State**

01-24-2008 90028 031 \*\*\*158.75

<b>DOCUMENT # P07000100038</b> 1. Entity Name <b>DOLPHIN SUPPLY INC.</b>																																																																																																																	
Principal Place of Business <b>1430 NE 43 COURT POMPANO BEACH, FL 33064</b>			Mailing Address <b>1430 NE 43 COURT POMPANO BEACH, FL 33064</b>																																																																																																														
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.																																																																																																															
City & State  Zip      Country		City & State  Zip      Country																																																																																																															
<div style="display: flex; justify-content: space-between;"> <div> <b>6. Name and Address of Current Registered Agent</b>   <b>RUCKER, EUNICE 1430 NE 43 COURT POMPANO BEACH, FL 33064</b> </div> <div> <b>7. Name and Address of New Registered Agent</b>          Name          Street Address (P.O. Box Number is Not Acceptable)          City      <b>FL</b>      Zip Code       </div> </div>																																																																																																																	
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)      DATE _____																																																																																																																	
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																																																																																																															
<div style="display: flex;"> <div style="flex: 1;"> <b>10. OFFICERS AND DIRECTORS</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">TITLE</td> <td style="width: 60%;">P</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>RUCKER, EUNICE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1430 NE 43 COURT</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>POMPANO BEACH, FL 33064</td> <td></td> </tr> <tr> <td>TITLE</td> <td>VP</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>RUCKER, THOMAS B</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1430 NE 43 COURT</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>POMPANO BEACH, FL 33064</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table> </div> <div style="flex: 1;"> <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">TITLE</td> <td style="width: 60%;">Secretary</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>RONALD SCOTT BLAIR</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>8408 TRENT COURT</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>BOCA RATON, FL</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	P	<input type="checkbox"/> Delete	NAME	RUCKER, EUNICE		STREET ADDRESS	1430 NE 43 COURT		CITY - ST - ZIP	POMPANO BEACH, FL 33064		TITLE	VP	<input type="checkbox"/> Delete	NAME	RUCKER, THOMAS B		STREET ADDRESS	1430 NE 43 COURT		CITY - ST - ZIP	POMPANO BEACH, FL 33064		TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME	RONALD SCOTT BLAIR		STREET ADDRESS	8408 TRENT COURT		CITY - ST - ZIP	BOCA RATON, FL		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY - ST - ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*Eunice Rucker*