

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000079953

Entity Name: DELPHINUS WAVES, CORP

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1007 ALMERIA RD  
WEST PALM BEACH, FL 33405 US

**New Principal Place of Business:**

**Current Mailing Address:**

1007 ALMERIA RD  
WEST PALM BEACH, FL 33405 US

**New Mailing Address:**

FEI Number: 27-3596109

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LACHMANN, ALEJANDRO E  
1007 ALMERIA RD  
WEST PALM BEACH, FL 33405 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CAMPOS, ORLANDO  
Address: CARRERA 7 CON 2 QTA JESUS NAZARETH  
City-St-Zip: LECHERIA, AN VENEZUELA

Title: VP  
Name: LACHMANN, ALEJANDRO  
Address: 1007 ALMERIA RD  
City-St-Zip: WEST PALM BEACH, FL 33405 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: ALEJANDRO LACHMANN

VP

04/26/2011

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

\_\_\_\_\_  
Date