

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000090495

Entity Name: DELLACO, INC.

**FILED**  
**Jan 25, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

600 WEST LAS OLAS BLVD.  
1307  
FT. LAUDERDALE, FL 33312 US

**New Principal Place of Business:**

**Current Mailing Address:**

3301 NE 183RD STREET  
1905  
AVENTURA, FL 33160 US

**New Mailing Address:**

FEI Number: 27-3921415

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CMS INTERNATIONAL ENTERPRISES, INC.  
550 BILTMORE WAY  
MEZZANINE - SUITE 200  
CORAL GABLES, FL 33134 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/S  
Name: TRODELLA, MELANIE R  
Address: 600 WEST LAS OLAS BLVD., #1307  
City-St-Zip: FT. LAUDERDALE, FL 33312 US

Title: VP/T  
Name: COBA, JOSHUA M  
Address: 3301 NE 183RD STREET  
City-St-Zip: AVENTURA, FL 33060 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: JOSHUA MARK COBA

VP

01/25/2012

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

\_\_\_\_\_  
Date