

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 28, 2005 08:00 AM
Secretary of State

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| DOCUMENT # P93000026517 1. Entity Name DELMAR PROPERTIES, INC. |  |
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| Principal Place of Business 244 HARBOR LANE MASSAPEQUA, NY 11762 | Mailing Address 244 HARBOR LANE MASSAPEQUA, NY 11762 |
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DO NOT WRITE IN THIS SPACE



01272005 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 11-3154815 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent B&C CORP. SERVICES OF CENTRAL FLORIDA INC. 390 N. ORANGE AVE. SUITE 1100 ORLANDO, FL 32801 |
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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 _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP CASSIS, CAROL 244 HARBOR LANE MASSAPEQUA, NY 11764 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AVPD CASSIS, NICHOLAS 2603 BONNIE COURT MERRICK, NY 11566 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD CASSIMATIS, GEORGE 146 RICHARD PATH ST. JAMES, NY 11780 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S CASSIMATIS, ELAINE 100 BROKLYN AVE FREEPORT, NY 11520 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AS CASSIMATIS, EMANUEL 1040RIVERSIDE DR WANTAGH, NY 11793 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <i>Carol</i> |

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1-28-05-80006-005 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Carol Cassis* Date: *2/21/05* Daytime Phone #: *516-623-7324*