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Jun 04 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000093128(1)
1. Corporation Name
Delta Business Corporation

Principal Place of Business:
118 S. Westshore Blvd.
Ste. 123
Tampa, FL 33609

Mailing Address:
118 S. Westshore Blvd.
Ste. 123
Tampa, FL 33609

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 10/29/97	4. FEI Number 59-3476795	Applied For Not Applicable
		5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☒ No		

9. Name and Address of Current Registered Agent

Abuimaish, Ghassan A.
118 S. Westshore Blvd. Ste 123
Tampa, FL 33609

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0602 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0605, Florida Statutes.

SIGNATURE

Signature of person submitting this report (Signature of Registered Agent required when translating)

(If the Registered Agent is a corporation, the signature of the officer or director of the corporation is required)

DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	NAME	☐ DELETE	13 TITLE	☐ Change ☐ Addition	
NAME	12225 Shady Forest Dr.		13 NAME		
STREET ADDRESS	Riverview, FL 33569		13 STREET ADDRESS		
CITY-STATE-ZIP			13 CITY-STATE-ZIP	☐ Change ☐ Addition	
TITLE	NAME	☐ DELETE	21 TITLE	☐ Change ☐ Addition	
NAME	Vinced Abuemaish		21 NAME		
STREET ADDRESS	10218 Evening Trail Dr.		21 STREET ADDRESS		
CITY-STATE-ZIP	Riverview, FL 33569		21 CITY-STATE-ZIP	☐ Change ☐ Addition	
TITLE	NAME	☐ DELETE	31 TITLE	☐ Change ☐ Addition	
NAME	Faten Abuimaish		31 NAME		
STREET ADDRESS	12225 Shady Forest Dr.		31 STREET ADDRESS		
CITY-STATE-ZIP	Riverview, FL 33569		31 CITY-STATE-ZIP	☐ Change ☐ Addition	
TITLE	NAME	☐ DELETE	41 TITLE	☐ Change ☐ Addition	
NAME			41 NAME		
STREET ADDRESS			41 STREET ADDRESS		
CITY-STATE-ZIP			41 CITY-STATE-ZIP	☐ Change ☐ Addition	
TITLE	NAME	☐ DELETE	51 TITLE	☐ Change ☐ Addition	
NAME			51 NAME		
STREET ADDRESS			51 STREET ADDRESS		
CITY-STATE-ZIP			51 CITY-STATE-ZIP	☐ Change ☐ Addition	
TITLE	NAME	☐ DELETE	61 TITLE	☐ Change ☐ Addition	
NAME			61 NAME		
STREET ADDRESS			61 STREET ADDRESS		
CITY-STATE-ZIP			61 CITY-STATE-ZIP	☐ Change ☐ Addition	

14. I hereby certify that the information supplied herein does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the registered agent or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or in an amendment with an address.

SIGNATURE: G. Abuimaish Ghassan Abuimaish 5-20-98 813-336-2194

CR2E034 (10/97)