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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000030232

1. Corporation Name
DELMARKAI CORP.

STREET ADDRESS CITY-ST-ZIP

1. Corporatio				Talifornia (1900 p. 1900 p. 1	
DELMARKAI CORP.				LAST AMASSEE ELOPIDA	
				i arayari ila 1919, Tarih 2014, Tarih 2014, Tarih 2014, Tarih 2014, Arih 1914, Arih 1914, Arih 1914, Arih 191	
		A		O PROGRAM KIN TOTOK IRAKI NOBIK BERKI BERKI BERKIN BILANG SIKKA DOLUH KANDO KAKA KIDI KADA	
Principal Place of Business Mailing Address					
1312 PALM DALE COURT 1312 PALM DALE COURT WEST PALM BEACH FL 33411 WEST PALM BEACH FL			11	}	
				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualifed	
				04/02/1998	
2. Principal Place of Business 2a. Mailing Address 26				4. FE Number Applied For Not Applicable	
26 Suite, Apt. #, etc. Stille, Apt. #, etc.				\$8.75 Additional	
22		27		5. Certificate of Status Desired [] Fee Required	
City & Sta	te	City & State		6. Election Campaign Financing (1 \$5.00 May Be	
23		[28]		Trust Fund Contribution Added to Fees	
Zπ	Country C't	Zip ()	Country . I	8. This corporation owes the current year Intangible	
24	25 9. Name and Address of Curren	[29] [3	[0]	Personal Properly Tax [Yes [No 10. Name and Address of New Registered Agent	
		FireAtateten wähilt	81 Name	iv. Hame and Address of Hew Registered Agent	
1	RILAWYER		63 64	de la CDO De Nicola de Mai Acceptatió	
343 ALMERIA AVENUE			82) Street Add	dress (P.O. Box Number is Not Acceptable)	
COF	RAL GABLES FL 33134		83		
			84 City	85 Zip Code	
L				FL	
11. Pursuant office or	to the provisions of Sections 607.050; registered agent, or both, in the State (2 and 607.1508, Florida Statutes of Florida Such change was aut	i, the above-named cor horized by the corporal	rporation submits this statement for the purpose of changing its registered tion's board of directors. Thereby accept the appointment as registered.	
agent. La	im familiar with, and accept the obligat	tions of, Section 607.0505, Florid	la Statutés	, ' ''	
SIGNATURE	Signature, typed or printed name of registered agen	it and title (Caronicatio (NOT) - B	legisteted Agent Signature regar	tool who rate a software.	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	[DELFTE	1.1 THILE	[Change	
NAME	CLOE, JACK L		1.2 NAME		
STREET ADDRESS	1312 PALM DALE COURT WEST PALM BEACH FL 33411		1.1351REETADORESS		
CITY-ST-ZIP	VSD VSD	[DELFTE	14 City-\$1-ZiP 2 1 Title	{	
NAME	CLOE, PEGGY J	(DECC +C	2.1 FILE 2.2 NAME	f Leuwide - [Maurion	
STREET ADDRESS	1312 PALM DALE COURT		23 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 33411		2 4 City -S1-ZiF		
TITLE		[DELETE	31 TITLE	[Change	
NAME			3.2 NAME	ļ,	
STREET ADDRESS			3 3 STREET ADORESS		
CITY-ST-ZIP			34 City-51-76		
TITLE		[DELETE	4 1 THEF	[Change [Addition	
NAME			4 2 NAME		
STREET ADDRESS			43 STREET ADORESS		
CITY-ST-ZIP TITLE		[DELETE	44 CiTy-ST-ZIP	[] Change	
NAME			5 2 NAME	£ , g	
STREET ADDRESS			53 STREET ADORESS	^	
CITY-ST-ZIP			54 OTY SI-ZIP	(), ()	
TITLE		[] DELETE	61 TiTLE	[10nanue] ff and file	
NAME			6.2 NAME		

or the exemption stated in Section 119 07(3)(i). Fixed Statutes. Further certify that the information execute this report as required by Chapter 607. Finda Statutes and that my signature shall have the same legal effect as if made under oath, that I am an execute this report as required by Chapter 607. Finda Statutes, and that my name appears in II other like empowered. 14. I hereby certify that the information supplied with this filing does not qualify for the exemption indicated on this annual report or supplemental annual report is true and accurate and that mofficer or director of the corporation or the receiver or trusted empowered to execute this report block 12 or Block 13 if changed, or on an alignification in the apprehenses, with all other like enure.

SIGNATURE

4-23-99

561.6404078