2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # S56009

1. Entity Name
DELTA EQUIPMENT SALES AND RENTALS, INC.

Principal Place of Business	Mailing Address
12879 SW 42 ST. MIAMI, FL 33175	12879 SW 42 ST. MIAMI, FL 33175

DO NOT WRITE IN THIS SPACE

01182006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-0275801	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

COLON, EUGENIO E
1994 SW 142 CT.
MIAMI, FL 33175

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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 _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 After May 1, 2006 Fee will be $550.00	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	COLON, EUGENIO E
STREET ADDRESS	14201 SW 66TH STREET, APT.207
CITY-ST-ZIP	MIAMI, FL 33184
TITLE	VSD
NAME	BOUZA, ANNA L
STREET ADDRESS	13501 SW 22 TERRACE
CITY-ST-ZIP	MIAMI, FL
TITLE	D
NAME	BOUZA, LAZARO
STREET ADDRESS	13501 SW 22 TERRACE
CITY-ST-ZIP	MIAMI, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/02/06--80007-012 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____   PRESIDENT   1/23/06   305-220-1166

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #