


**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 07, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 754859</b> 1. Entity Name <b>CYNPOZIUM, INC.</b>	
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Principal Place of Business <b>503 SABAL PALM DR. LAKE PARK, FL 33403 US</b>	Mailing Address <b>503 SABAL PALM DR. LAKE PARK, FL 33403 US</b>
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04032008 No Chg-NP CR2E037 (4/08)

4. FEI Number <b>59-2116577</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>MARGULIS, STEPHEN 10747 N.E. 26TH STREET SUNRISE, FL 33322</b>
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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<b>Filing Fee is \$61.25 Due by May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>000000836129</b> <b>04/15/08-60043-013 61.25</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GREY, CYNTHIA 503 SABAL PALM DR LAKE PARK, FL 33403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD POZZOBONI, YOLANDA M. 257 CYPRESS PT DR PALM BCH GARDENS, FL 33418
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BROWN CLARK, TRUDY 509 SABAL PALM DR WEST PALM BEACH, FL 33403
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 of this report.

*Cynthia Grey* **CYNTHIA GREY**

**4-3-08**

**561-863-0800**