

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002164

Entity Name: TCYBER, INC.

FILED
Feb 11, 2006
Secretary of State

Current Principal Place of Business:

65 EAST NASA BLVD
SUITE 201
MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

PO BOX 120010
WEST MELBOURNE, FL 329120010 US

New Mailing Address:

FEI Number: 59-3485884

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMUNDSEN MOORE & TORPY
ATTN: RICHARD E. TORPY
202 N. HARBOR CITY BLVD., #300
MELBOURNE, FL 32935 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCVC () Delete
Name: MERMIS, TERRI L
Address: P.O. BOX 120010
City-St-Zip: MELBOURNE, FL 32912

Title: VSTD () Delete
Name: MERMIS, TERRI L
Address: P.O. BOX 120010
City-St-Zip: MELBOURNE, FL 32912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERRI L. MERMIS/PRESIDENT

PRES

02/11/2006

Electronic Signature of Signing Officer or Director

Date