


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 17, 2007 08:00 AM
Secretary of State

DOCUMENT # G91158 1. Entity Name CYPRESS PRINTING CENTER, INC.	
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Principal Place of Business % GARLAND HARDIN 140 S.W. 15TH STREET (MCNAB ROAD) POMPANO BEACH, FL 33060	Mailing Address % GARLAND HARDIN 140 S.W. 15TH STREET (MCNAB ROAD) POMPANO BEACH, FL 33060
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07042007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2379974	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

HARDIN, GARLAND
 140 S.W. 15TH STREET
 (MCNAB ROAD)
 POMPANO BEACH, FL 33060

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HARDIN, GARLAND 1082 S.W. 2ND AVENUE POMPANO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARDIN, LEETA 1082 S.W. 2ND AVENUE POMPANO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARDIN, REX 1082 S.W. 2ND AVENUE POMPANO BEACH, 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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000000769285
 07/17/07-80007-010 150.00

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: *Rex Hardin* 7/8/07 9547857716

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