


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 12, 2007 08:00 AM
Secretary of State**

DOCUMENT # J93245 1. Entity Name SYBS, INC.	
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Principal Place of Business 57 C EASTGATE DR BOYNTON BEACH, FL 33436 US	Mailing Address 57 C EASTGATE DR BOYNTON BEACH, FL 33436 US
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DO NOT WRITE IN THIS SPACE



01042007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0010454	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

SANDERS, SYBIL E.
57C EASTGATE DR
BOYNTON BCH, FL 33436

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IN THIS SPACE**

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 re-registering) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SANDERS, SYBIL E. 57C EASTGATE DR BOYNTON BCH, FL 33436
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NIRESTEIN, ELLEN 23 BRAINARD RD WEST HARTFORD, CT 06117
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANDERS, JONATHAN 130 E 72ND ST. APT. 4 NEW YORK, NY 10021
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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01/12/07-80012-013 150.00

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IN THIS SPACE**

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: Sybil E. Sanders SYBIL E. SANDERS 1/5/07 (561)364-7424
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Definite Phone #