

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K53260

FILED
Jan 16, 2009
Secretary of State

Entity Name: CYPRESS REFRESHMENTS, INC.

Current Principal Place of Business:

P.O. BOX 272621
BOCA RATON, FL 33427

New Principal Place of Business:

6631 LUCAYA AVENUE
BOYNTON BEACH, FL 33437

Current Mailing Address:

P.O. BOX 272621
BOCA RATON, FL 33427

New Mailing Address:

FEI Number: 59-2940956 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANASSE, HERBERT
6631 LUCAYA AVE
BOYNTON BEACH, FL 33437 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: D () Delete
Name: MANASSE, HEATHER,
Address: 6631 LUCAYA AVENUE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: MANASSE, MITCHELL,
Address: 3 SCOTT LANE
City-St-Zip: DOYLESTOWN, PA 18901

Title: D () Delete
Name: PETERS, ROBIN,
Address: 401 BONESET BRANCH LANE
City-St-Zip: JACKSONVILLE, FL 32259

Title: D () Delete
Name: MANASSE, BARRY,
Address: 201 W 70TH ST #7B
City-St-Zip: NEW YORK, NY

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MANASSE, HEATHER,
Address: 6631 LUCAYA AVENUE
City-St-Zip: BOYNTON BEACH, FL 33437

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

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

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

Title: VP () Change (X) Addition
Name: MANASSEE, HERBERT
Address: 6631 LUCAYA AVENUE
City-St-Zip: BOYNTON BEACH, FL 33437

I hereby certify that the information supplied with this filing does not qualify 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: HERBERT MANASSEE

VP

01/16/2009

Electronic Signature of Signing Officer or Director

Date