

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000069569

Entity Name: CYB SPECIALTIES, LLC

FILED
Apr 11, 2007
Secretary of State

Current Principal Place of Business:

16940 US HWY 19 N
SUITE # 334
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

16940 US HWY 19 N
SUITE # 334
CLEARWATER, FL 33764

New Mailing Address:

FEI Number: 20-1654902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAKER, BEULAH M
16940 US HWY 19 N
SUITE # 334
CLEARWATER, FL 33764 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CYB SPECIALTIES, LLC,
Address: 16940 US HWY 19 N SUITE #334
City-St-Zip: CLEARWATER, FL 33764

Title: MGR () Delete
Name: BAKER, BEULAH M OWNER
Address: 16940 US HWY 19 N SUITE # 334
City-St-Zip: CLEARWATER, FL 33764 US

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BEULAH M BAKER

MGRM

04/11/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date