

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000073893

Entity Name: THE CYRUS GROUP, LLC

FILED  
Aug 17, 2006  
Secretary of State

## Current Principal Place of Business:

10905 SW 177 TERRACE  
MIAMI, FL 33157

## New Principal Place of Business:

PO BOX 97-1183  
MIAMI, FL 33197

## Current Mailing Address:

10905 SW 177 TERRACE  
MIAMI, FL 33157

## New Mailing Address:

PO BOX 97-1183  
MIAMI, FL 33197

FEI Number: 20-0698978      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

LEWIS, KEVIN R  
10905 SW 177 TERRACE  
MIAMI, FL 33157      US

## Name and Address of New Registered Agent:

LEWIS, RHONDA  
10905 SW 177 TERRACE  
MIAMI, FL 33157      US

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: RHONDA LEWIS

08/17/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: LEWIS, RHONDA F  
Address: 10905 SW 177 TERRACE  
City-St-Zip: MIAMI, FL 33157

Title: MGR ( ) Delete  
Name: LEWIS, KEVIN R  
Address: 10905 SW 177 TERRACE  
City-St-Zip: MIAMI, FL 33157

Title: MGRM (X) Delete  
Name: LEWIS, KEVIN A  
Address: 10905 SW 177 TERRACE  
City-St-Zip: MIAMI, FL 33157

Title: MGRM (X) Delete  
Name: LEWIS, KRYSTAL R  
Address: 10905 SW 177 TERRACE  
City-St-Zip: MIAMI, FL 33157

Title: MGRM (X) Delete  
Name: LEWIS, KALEB I  
Address: 10905 SW 177 TERRACE  
City-St-Zip: MIAMI, FL 33157

## ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition  
Name: LEWIS, RHONDA F  
Address: 10905 SW 177 TERRACE  
City-St-Zip: MIAMI, FL 33157

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: ( ) 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: RHONDA LEWIS

PRES

08/17/2006

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