

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 20 AM 10:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L22458** (8)

1. Corporation Name

CYPRESS PARK DEVELOPMENT, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
**3401 SOUTHOCEAN BLVD
APT 6
HIGHLAND BEACH FL 33487
US** **525 BROADWAY MALL
3363 SHERIDAN STREET
HICKSVILLE NY 11801
US**

3. Date Incorporated or Qualified **10/11/1989** 3a. Date of Last Report **04/25/1994**
4. FEI Number **11-2987851** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 **525 B BROADWAY MALL**
22 Suite, Apt. #, etc. 27 _____
23 City & State **HICKSVILLE NY**
24 Zip **11801** 25 Country **USA**

9. Name and Address of Current Registered Agent
**TRIPLE F. PROPERTIES, INC.
3401 SOUTH OCEAN BLVD
APT 6
HIGHLAND BEACH FL 33487**

10. Name and Address of New Registered Agent
81 Name _____
82 Street Address (P.O. Box Number is Not Acceptable) _____
83 _____
84 City **FL** 85 Zip Code _____

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRANK, KENNETH	1.2 NAME	
STREET ADDRESS	525B BROADWAY MALL	1.3 STREET ADDRESS	
CITY - ST - ZIP	HICKSVILLE NY	1.4 CITY - ST - ZIP	
TITLE	ST	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRANK, FRANKLIN L.	2.2 NAME	
STREET ADDRESS	525B BROADWAY MALL	2.3 STREET ADDRESS	3401 S. Ocean Blvd Apt 6
CITY - ST - ZIP	HICKSVILLE NY	2.4 CITY - ST - ZIP	Highland Beach, FL 33487
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ (Signature) **4/11/95** **516-935-8280**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR