FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

L22458

(8)

CYPRESS PARK DEVELOPMENT, INC.

FILED	
Apr 17 1998 8:00an	1
Secretary of State	

Principal Place of Business	Mailing Address		- I INDRIDAL DIO 18810 INFAL DIDOLETINI COM NINCI	DIBIL DIBIL BIRIL OLDLI OLDLI FABI
3401 SOUTHOCEAN BLVD 525 B BROADWAY I				
APT 6	3363 SHERIDAN STREET			
HIGHLAND BEACH FL 33487	HICKSVILLE NY 11801		DO NOT WRITE IN TH	IIS SPACE
. 08	US		3. Date Incorporated or Qualified	
2. Principal Place of Business	2a, Mailing Address		10/11/1989 4. FEI Number	
<u></u>	26. Walling Address			Applied For
Suite, Apt. #, etc.	Suite, Apt. #, etc.		11-2987851	Not Applicable \$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Regulred
City & State	City & State	 	6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zıp	Country	8. This corporation owes or has paid the	current year Intangible
24 25		30	Personal Property Tax due June 30.	Yes No
9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Register	ed Agent
TRIPLE F. PROPERTIES, INC.		81 Name		
3401 SOUTH OCEAN BLVD		82 Street Addi	ress (P.O. Box Number is Not Acceptable)	
APT 6				
HIGHLAND BEACH FL 33487		83		
		84 City		85 Zip Code
44 Pure and to the overlines of Continue COZ OF	00 - 1007 4000 Florida 000 A		F	
11. Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the State	te of Florida. Such change was a	uthorized by the corporat	poration submits this statement for the purposition's board of directors. I hereby accept the a	e of changing its registered appointment as registered
agent. I am familiar with, and accept the obli	gations of, Section 607 0505, Flo	rida Statutes.		
SIGNATURE Signature, typed or printed name of registered a	result and late of points able (NOTE	Registored Agent signature requir	red when reinstating) DATE	
<u> </u>	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE P	DELETE	1.1 TITLE		Change 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	☐ DELETE	2.1 TITLE		Change Addition
NAME FRANK, FRANKLIN L.		2.2 NAME		
STREET ADDRESS 3401 S OCEAN BLVD APT 6	3	2.3 STREET ADDRESS		
CITY-ST-ZIP HIGHLAND BEACH FL		2 4 CITY-ST-ZIP		
TITLE	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3 3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	3.4. CITY - ST - ZIP		Chance 1 4444
NAME	first occur.	4.1 TITLE 4.2 NAME		Change Addition
STREET ADDRESS				
CITY-ST-ZIP		4.3 STREET ADDRESS		
TITLE	☐ DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY - ST - ZIP		
TITLE	☐ DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		- —
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-2IP		6.4 CITY+ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

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