

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000106923

FILED  
Apr 03, 2007  
Secretary of State

Entity Name: CYBERCIS CORPORATION

## Current Principal Place of Business:

15298 SW 104 ST  
935  
MIAMI, FL 33196

## New Principal Place of Business:

## Current Mailing Address:

14629 SW 104 ST  
324  
MIAMI, FL 331862905

## New Mailing Address:

FEI Number: 52-2307255      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LIEBER, BARRY ESQ  
1001 BRICKELL BAY DRIVE  
SUITE 1704  
MIAMI, FL 33131 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: PRES ( ) Delete  
Name: FRANKY, LISANDRO  
Address: 15298 SW 104 ST APT 935  
City-St-Zip: MIAMI, FL 33196

Title: VP ( ) Delete  
Name: FRANKY, LUCY  
Address: 15298 SW 104 ST APT 935  
City-St-Zip: MIAMI, FL 33196

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: LISANDRO FRANKY

PRES

04/03/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date