

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 01, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P02000031595

1. Entity Name

CYPRESS DOOR AND LOCKSMITH, INC.



Principal Place of Business

6751 NORTHWEST 22ND TERRACE  
FORT LAUDERDALE, FL 33309

Mailing Address

6751 NORTHWEST 22ND TERRACE  
FORT LAUDERDALE, FL 33309



07262005 No Chg-P CR2E034 (10/03)

4. FEI Number

71-0874219

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

SANTOS, ROBERT JR.  
6751 NORTHWEST 22ND TERRACE  
FORT LAUDERDALE, FL 33309

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 7, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE D  
NAME SANTOS, ROBERT JR.  
STREET ADDRESS 6751 NORTHWEST 22ND TERRACE  
CITY-ST-ZIP FORT LAUDERDALE, FL 33309

TITLE  
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CITY-ST-ZIP

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IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 29, 2005 964-912-3667  
Date Daytime Phone #