

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000043035

Entity Name: CYPRESS SCREENS, INC.

FILED
Mar 10, 2005
Secretary of State

Current Principal Place of Business:

13700 NW 21 ST.
PEMBROKE PINES, FL 33028

New Principal Place of Business:

15705 NW 10 ST
PEMBROKE PINES, FL 33028

Current Mailing Address:

13700 NW 21 ST.
PEMBROKE PINES, FL 33028

New Mailing Address:

15705 NW 10 ST
PEMBROKE PINES, FL 33028

FEI Number: 81-0555373

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLISON, THOMAS G
13700 NW 21 ST.
PEMBROKE PINES, FL 33028 US

Name and Address of New Registered Agent:

ELLISON, THOMAS G
15705 NW 10 ST
PEMBROKE PINES, FL 33028 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: THOMAS G. ELLISON

03/10/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PV () Delete
Name: ELLISON, THOMAS G
Address: 13700 NW 21 ST.
City-St-Zip: PEMBROKE PINES, FL 33028

Title: ST () Delete
Name: CYPRESS, RACHEL A
Address: 13700 NW 21 ST.
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PV (X) Change () Addition
Name: ELLISON, THOMAS G
Address: 15705 NW 10 ST
City-St-Zip: PEMBROKE PINES, FL 33028

Title: ST (X) Change () Addition
Name: CYPRESS, RACHEL A
Address: 15705 NW 10 ST
City-St-Zip: PEMBROKE PINES, FL 33028

I hereby certify that the information supplied with this filing does not qualify for the 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 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: THOMAS G. ELLISON

PV

03/10/2005

Electronic Signature of Signing Officer or Director

Date