

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 21, 2005 8:00 am**  
**Secretary of State**

03-21-2005 90090 031 \*\*\*150.00

**20022820**



02032005 Chg-P CR2E034 (10/03)

<b>DOCUMENT # P02000081020</b> 1. Entity Name CYPRESS PETROLEUM ENTERPRISES, INC.					
Principal Place of Business 8800 S.W. 104TH STREET MIAMI, FL 33176			Mailing Address 8800 S.W. 104TH STREET MIAMI, FL 33176		
2. Principal Place of Business <i>2401 NW 30th Ave</i>		3. Mailing Address <i>2401 NW 30th Ave</i>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State <i>Miami FL</i>		City & State <i>Miami FL</i>		4. FEI Number 52-2369821	
Zip <i>33142</i>		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  PEQUENO, TOMAS 8800 S.W. 104TH STREET MIAMI, FL 33176			7. Name and Address of New Registered Agent  Name Joe B. Cox, c/o Cox & Nici 1185 Immokalee Rd., Suite 110 Naples, FL 34110		
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 <i>Joe B. Cox</i> <span style="float: right;">DATE</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PEQUENO, TOMAS 8800 S.W. 104TH STREET MIAMI, FL 33176		<input checked="" type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD PEQUENO, GLADYS 8800 S.W. 104TH STREET MIAMI, FL 33176		<input checked="" type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, P, V, T, S Tomas Pequeno, Jr. 2401 NW 30th Avenue Miami, FL 33142		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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: <i>Tomas Pequeno Jr.</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date Daytime Phone #</small>					