

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000082829

FILED  
Jul 01, 2004  
Secretary of State

Entity Name: CYPRESS HEAD DEVELOPMENT, INC.

## Current Principal Place of Business:

PO BOX 1094  
LOXAHATCHEE, FL 33470

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1094  
LOXAHATCHEE, FL 33470

## New Mailing Address:

FEI Number: 16-1622763

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAHARAJ, JOHN  
121 WATERVIEW WAY  
ROYAL PALM BCH, FL 33411 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

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SABITA, MAHANRAY  
Address: PO BOX 1094  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VP ( ) Delete  
Name: MAHARAY, JOHN  
Address: PO BOX 1094  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VP ( ) Delete  
Name: MAHARAY, MICKEY  
Address: PO BOX 1094  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VP ( ) Delete  
Name: MAHARAY, YAGAN  
Address: PO BOX 1094  
City-St-Zip: LOXAHATCHEE, FL 33470

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SABITA, MAHARAJ  
Address: PO BOX 1094  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VP (X) Change ( ) Addition  
Name: MAHARAJ, JOHN  
Address: PO BOX 1094  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VP (X) Change ( ) Addition  
Name: MAHARAJ, MICKEY  
Address: PO BOX 1094  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VP (X) Change ( ) Addition  
Name: MAHARAJ, YOGAN  
Address: PO BOX 1094  
City-St-Zip: LOXAHATCHEE, FL 33470

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: SABITA MAHARAJ

P

07/01/2004

Electronic Signature of Signing Officer or Director

Date