

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000104717

Entity Name: CYRUS ENTERPRISES, INC.

FILED
May 01, 2004
Secretary of State

Current Principal Place of Business:

P O BOX 540164
LAKE WORTH, FL 334540164

New Principal Place of Business:

P O BOX 541092
LAKE WORTH, FL 334541092

Current Mailing Address:

P O BOX 540164
LAKE WORTH, FL 334540164

New Mailing Address:

P O BOX 541092
LAKE WORTH, FL 334541092

FEI Number: 16-1631724

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, DARRYL B
1100 BARNETT DR, STE 49
LAKE WORTH, FL 33463 US

Name and Address of New Registered Agent:

MOORE, DARRYL B
209 C-3 FOXTAIL DRIVE
WEST PALM BEACH, FL 33415 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: DARRYL B. MOORE

05/01/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VTSD () Delete
Name: MOORE, DARRYL B
Address: 1209 FOXTAIL DR., APT C3
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: MOORE, DARRYL B
Address: 209 FOXTAIL DR., SUITE C-3
City-St-Zip: WEST PALM BEACH, FL 33415

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: DARRYL B. MOORE

PS

05/01/2004

Electronic Signature of Signing Officer or Director

Date