. 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2006 08:00 AM Secretary of State

DOCUMENT # 1. Entity Name CYBERTECH ENTER			
Principal Place of Business 3742 S. NOVA RD. #21 PORT ORANGE, FL 32129	US	Mailing Address 3742 S. NOVA RD. #21_ PORT ORANGE, FL 32129	us

3742 S. NOVI PORT ORANG	A RO. #21 E. Fl. 32129 US	3742 S. NOVA RD. #21_ PORT ORANGE, FL 32129	us				
DO NOT WRITE IN THIS SPACE 6. Name and Addrass of Current Registered Agent			03202006 4. FEI Numb 20-075	03202006 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For 20-0756784 Not Applicable			
			,	5. Certificate of Status Desired Fee Required			
3742 S. NÓ 21	RAYMOND F JR	Sister ve Agen			NOT W		
the obligation	named entity submits this statement for ti ons of registered agent.		ed office or reg	pistered agent, or bo	ith, in the State of Flo		niliar with, and accept
	Signature, typed or printed name of registered agent and	dide if applicable (NOTE Prepistere	ed Agent signature re	quired when remstating)	,	DATE	
	E NOWIII FEE IS \$150.00 by 1, 2006 Fee will be \$550.00	S. Election Campaign Final Trust Fund Contribution.		\$5.00 May Be Added to Fees			
10. ITHE NAME STREET ADDRESS CITY ST JIP TITLE NAME STREET ADDRESS CITY ST JIP STREET ADDRESS CITY ST JIP TITLE NAME STREET ADDRESS CITY ST JIP TITLE	OFFICERS AND DI PVP MONTELL, RAYMOND F JR 3742 S. NOVA ROAD #21 PORT ORANGE, FL 32129 S PLESSINGER, MATTHEW A 3742 S. NOVA ROAD #21 PORT ORANGE, FL 32129 T MONTELL, JEREMY 3742 S. NOVA ROAD #21 PORT ORANGE, FL 32129				H000003 05/11/06-6 NOT W THIS SF	30041-00	22 {50.00
NAME Streli Address City St. Zip	partity that the information purposing with the				0 F		

12. It hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 it made under oath; that I am an officer or director of the corporation of the receiver of trustee empowered to execute his report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 in changed, or on an attachment with an address, with all other like expowered.

SIGNATURE: __

SIGNADORE AND TYPED OR PROPED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/2006 (306) 235-528 B