

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90153 033 ***150.00

DOCUMENT # P04000028632 1. Entity Name CYBERTECH ENTERPRISES INC.			
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	
2. Principal Place of Business - No P.O. Box # 42 Fall Drive		3. Mailing Address P.O. Box 238292	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Port Orange FL		City & State Port Orange FL	
Zip 32129		Zip 32123	
Country USA		Country USA	
4. FEI Number 20-0756784		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MONTELL, RAYMOND F JR 3742 S. NOVA ROAD 21 PORT ORANGE, FL 32129		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 42 Fall Drive City Port Orange FL Zip Code 32129	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 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	PVP MONTELL, RAYMOND F JR 3742 S. NOVA ROAD #21 PORT ORANGE, FL 32129	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVP Montell, Raymond F Jr 42 Fall Drive Port Orange FL 32129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PLESSINGER, MATTHEW A 3742 S. NOVA ROAD #21 PORT ORANGE, FL 32129	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Montell, Jeremy 42 Fall Drive Port Orange FL 32129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MONTELL, JEREMY 3742 S. NOVA ROAD #21 PORT ORANGE, FL 32129	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Montell, Jeremy 42 Fall Drive Port Orange FL 32129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Rugh, Jonathan 42 Fall Drive Port Orange FL 32129	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Rugh, Jonathan 42 Fall Drive Port Orange FL 32129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
12. I 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 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 4/29/08	
Daytime Phone # 386-233-5268			