

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000152929

Entity Name: CYPRESS HEALTH PARTNERS, INC

FILED
Apr 23, 2008
Secretary of State

Current Principal Place of Business:

6423 COLLINS AVE., STE. 1008
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

6423 COLLINS AVE., STE. 1008
MIAMI BEACH, FL 33141

New Mailing Address:

FEI Number: 20-8031761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERNANDEZ, EDDY F.
6423 COLLINS AVE., STE. 1008
MIAMI BEACH, FL 33141 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FERNANDEZ, EDDY F.
Address: 6423 COLLINS AVE., STE. 1008
City-St-Zip: MIAMI BEACH, FL 33141

Title: D () Delete
Name: PEREZ, ERNESTO J. MD
Address: 1450 6TH ST., SE
City-St-Zip: WINTER HAVEN, FL 33880

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FERNANDEZ, EDDY F CEO
Address: 6423 COLLINS AVE., STE. 1008
City-St-Zip: MIAMI BEACH, FL 33141

Title: D (X) Change () Addition
Name: PEREZ, ERNESTO J PRES
Address: 1450 6TH ST., SE
City-St-Zip: WINTER HAVEN, FL 33880

Title: D () Change (X) Addition
Name: FERNANDEZ, SUSAN P SEC
Address: 6423 COLLINS AVE APT 1008
City-St-Zip: MIAMI BEACH, FL 33141

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: EDDY F. FERNANDEZ

CEO

04/23/2008

Electronic Signature of Signing Officer or Director

Date