## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



Secretary of State DIVISION OF CORPORATIONS

P93000072740 (2) DOCUMENT #

CYPRESS PETROLEUM CORPORATION

Principal Place of Business

Mailing Address

**FILED** Apr 13 1998 8:00am Secretary of State



3091 62ND ST NW FT LAUDERDALE FL 33309		3091 62ND ST NW FT LAUDERDALE FL 33309		DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified 10/20/1993		
2. Principal Place of Business		20. Milling Address		4. FEI Number	Applied For	
Suite, Apt. #, etc.		26 POBOX 9327		65-0443168	Not Applicable	
22		Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		STAR STATE COUNCIFL		6. Election Campaign Financing	<b>\$5.00</b> May Be	
<b>23</b> Zip	Country	28 (1) KAIK SI	Country	Trust Fund Contribution	Added to Fees	
24	25	33075	30 2/5/9	8. This corporation owes or has paid the cur	rent year Intangible  Yes  No	
	9. Name and Address of Curren	140 00 00	30 20.7	Personal Property Tax due June 30.  10. Name and Address of New Registered		
RAYMOND, JOHN J JR 81 Name						
1200 NORTH FEDERAL HWY, 411			90 0	82 Street Address (P.O. Box Number is Not Acceptable)		
BOCA RATON FL 33432			62 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)		
			83			
			84 City		15-1-7-0-1	
				FL	85 Zip Code	
11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE						
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
TITLE	PO	DELETE	1.1 TITLE		Change Addition	
NAME	PAYAN, ROSA M		1.2 NAME			
STREET ADDRESS	11031 SW 1 CT		1.3 STREET ADDRESS			
CITY-ST-ZIP	CORAL SPRINGS FL 33071		1.4 CITY-ST-ZIP			
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
City-St-ZIP		NEW PERSON	2.4 CITY - ST - ZIP			
TIFLE		☐ DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3 3 STREET ADDRESS			
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Observe Addition	
NAME		End Dittil	4.1 IIILE 4.2 NAME		Change Addition	
STREET ADDRESS			4. 2 NAME 4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 City-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME		******	5.2 NAME		_ 2100182	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAME			
STREET ADORESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY+ST-ZIP			
14. I hereby co	ertify that the information supplied wi	th this filing does not qualify for	the exemption stated in	Section 119.07(3)(i), Florida Statutes. I further ce	rtify that the information	

officer or director of the corporation or Block 12 or Block 13 if changed, or gr into ecoiver or trustee showered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in a paraltachment with an address