

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000075439 (6)

1. Corporation Name  
CYR, INC.



Principal Place of Business

Mailing Address

1323 SE 17 STREET #635  
FT LAUDERDALE FL 33316

1323 SE 17 STREET #635  
FT LAUDERDALE FL 33316

3. Date Incorporated or Qualified 10/02/1995	3a. Date of Last Report N/A
4. FEI Number 65-0614444	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 271-273 SW 33RD CT Suite, Apt. #, etc. 22 FT LAUD, FLORIDA City & State 23 FL Zip 24 33315	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 FL Zip 29 33315	Country 25 US 30 US
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MACDONALD, IAN  
1323 SE 17 STREET #635  
FT LAUDERDALE FL 33316

81 Name IAN MAC DONALD
82 Street Address (P.O. Box Number is Not Acceptable) 1221 SW 18TH STREET
83
84 City FT LAUDERDALE
FL
85 Zip Code 33315

11. Pursuant to the provisions of Sections 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 *IAN MAC DONALD* IAN MAC DONALD PRESIDENT 1/22/96  
Signature, typed or printed name of registered agent and box 4 applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input type="checkbox"/> DELETE	1.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME MACDONALD, IAN		1.2 NAME	
STREET ADDRESS 1323 SE 17 STREET #635		1.3 STREET ADDRESS 1221 SW 18TH STREET	
CITY-ST-ZIP FT LAUDERDALE FL 33316		1.4 CITY-ST-ZIP FT LAUDERDALE, FL 33315	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *IAN MAC DONALD* IAN MAC DONALD 1/22/96 (305) 760-9626  
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (12/95)