

P95000075439

(Requestor's Name)

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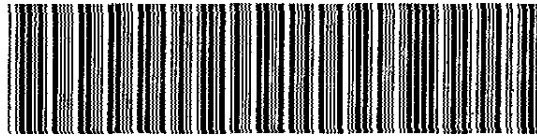
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

3-2

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CYR, Inc.
(Name of corporation)

DOCUMENT NUMBER: P95000075439

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Peter M. Commette, Esq.
(Name of person)

Peter M. Commette, P.A.
(Name of firm/company)

1323 SE Third Ave
(Address)

Fort Lauderdale, FL 33316
(City/state and zip code)

For further information concerning this matter, please call:

Peter M. Commette, Esq. at 954, 764-0005, Ext. 43
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

February 6, 2004

PETER M. COMMETTE, P.A.
% PETER M. COMMETTE, ESQ.
1323 SE 3RD AVE.
FT. LAUDERDALE, FL 33316

SUBJECT: CYR, INC.
Ref. Number: P95000075439

We have received your document for CYR, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please complete document enclosed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Anna Chesnut
Document Specialist

Letter Number: 704A00008384

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04 FEB 27 AM 9:09
DIVISION OF CORPORATIONS

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : CYR, Inc.

2. The mailing address of the corporation : 271-273 S.W. 33rd Ct
Ft Lauderdale, FL 33315

3. Date of incorporation/qualification: 10/2/95 Document number: 95000075439

4. The name and address of the current registered agent and registered office:

Ian MacDonald
1615 S.W. 15th Terrace
Fort Lauderdale, FL 33312

5. The name and address of the new registered agent (if changed) and /or registered office (if changed):
(P.O. Box **NOT** Acceptable)

Peter M. Commette, Esq.
1323 S.E. Third Ave.
Fort Lauderdale, FL 33316

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Ian MacDonald
(Signature of an officer, chairman or vice chairman of the board)

2/25/04
(Date)

Ian MacDonald
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

[Signature]
(Signature of Registered Agent)

2-25-04
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

*** FILING FEE: \$35.00 *P*