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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600002961 (6)

CYRUS INVESTMENTS LTD., INC.

Principal Place of Business

Mailing Address

FILED Jun 04 1997 8:00am Secretary of State



2172 COFFEEPOT BLVD ST PETERSBURG FL 33704		2172 COFFEEPOT BLVD ST PETERSBURG FL 33704-4650					
		gradient state of the state of		3. Date incorporated or Qualified 3a. Date of Last Report 01/04/1996			
2. Principal P	Place of Business	2a. Mailing Address		4. FEt Number	TA	pplied For	
21		26		59-335120	Cr ⊢	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			_ ¢0.75	Additional	
City & State		27		Fee Required			
23	e	City & State			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	Zip	Coun	lry	8. This corporation has tiability for i	ntangible tax under s	s. 199.032.
24	25	29	30		Florida Statutes Yes 🔲 No		
	9. Name and Address of Current I	Registered Agent			10. Name and Address of New Reg	distered Agent	
JAN	SSEN, DUANE H		8	1 Name			
1626	8 38TH AVE N		82 Street Addi		ress (P.O. Box Number is Not Acceptable)		
ST F	PETERSBURG FL 33713		83				
	•			4 City			Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.0502 a registered agent, or both, in the State of im familiar with, and accept the obligation	and 607.1508, Florida Statut Florida: Such change was a ons of, Section 607.0505, Flo	es, the abo authorized orida Statul	ove-named corpora by the corpora es.	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of changing it the appointment as	its registered registered
SIGNATURE	Signature, typed or printed name of registerno agent a	and fills if penticable (NIC)	E : Or aintared A	and circulus rea	jured when reinstating)	DATE	
12.			13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		RS IN 12	
TITLE	DPS	DELETE 11TB		· 1	7.00.11.01.01.11.10.01.10	Change	Addition
NAME	MARKER, ARNAZ		1.2 NAM			onungo	
STREET ADDRESS	2172 COFFEEPOT BLVD		1.3 STREET ADDRESS				
CITY-ST-ZIP	ST PETERSBURG FL 33704		1.4 CITY - ST - ZIP				
TITLE	DN ALMOTN, RAFTA DELETE		2.1 TITLE			☐ Change	Addition (
NAME	ALDIQ, RAFIA		2.2 NAME			Change	- Young
	1523 EDEN ISLE BLVD NE #340						
STREET ADDRESS	ST PETERSBURG FL 33704		2.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	DT DELETE		2. 4 CITY				T a aano
NAME	MADVED IAMOUEED		3.1 10116	1	Change Addilio		
	0470 COECCOOT DIVID		3.2 NAM				
STREET ADDRESS	OT DETERORIEDO EL 22704			ET ADDRESS			1
CITY-ST-ZIP	OT LETEHODONG LE 00104	0.4.0		- S1 - ZIP			1.2.00
TITLE			4.1 TITLE			Change	☐ Addition
NAME			4. 2 NAM				ŀ
STREET ADORESS	-			ET ADDRESS			
CITY-ST-ZIP		Delete	4.4 CITY				
TITLE		☐ DELETE 51T)		1	Change Addition		
NAME			5.2 NAM	i			
STREET ADDRESS			5.3 STRE	ET ADDRESS			
CITY-ST-ZIP		7	5.4 CITY		· · · · · · · · · · · · · · · · · · ·		
TITLE	DELETE 6.1 7		6.1 THILE		Change Addition		Addition
NAME			6.2 NAM	<u> </u>			
STREET ADDRESS			6.3 STRE	et address			
CITY-ST-ZIP			6.4 CITY	· \$1 - ZIP			

I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). 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 eath, 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.

(813) 562-2813