2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000039624

Entity Name: CYBETREKS, INC.

FILED Sep 03, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
2234 N. FEDERAL HWY 424				S. E. 9TH STREET 821 (PALM PLAZA)				
BOCA RATON, FL 33431 US								
Current Mailing Address:				New Mailing Address:				
2234 N. FEDERAL HWY 424 BOCA RATON, FL 33431 US				P.O. BOX 180 DEERFIELD BEACH, FL 33443 US				
FEI Number:			EEI Nun	nber Not Appl			e of Status Desired (X)	
							. ,	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:			
FERRARIO, GABRIELA 3423 34TH WAY WEST PALM BEACH, FL 33407 US				FERRARIO, GABRIELA S.E. 9TH STREET 821 DEERFIELD BEACH, FL 33441 US				
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: GABRIELLA FERRARIO				09/03/2005				
	Electronic S	Signature of Registered Agent					Date	
Election Cam	paign Financing Tru	(b), F.S., the corporation did not reuse Fund Contribution ().	∍ceive tl	•			OFDS AND DIDEOTORS	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	DT () Del NODELL, JEFFREY 817 S. FEDRAL DEERFIELD BEACH	'R		Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	DVS () Del FERRARIO, GABRI 3423 34TH WAY WEST PALM BEAC	ELA		Title: Name: Address: City-St-Zip:	DVS (X) FERRARIO, GAE 821 S. E. 9TH S DEERFIELD BE	RIELA TREET) Addition	
Title: Name: Address: City-St-Zip:	C () Del BARTOLUCCI, DAV 3423 34TH WAY WEST PALM BEAC	ID		Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	PC () Del GUALTIERI, SERGE 47 COLUMBIA CT DEERFIELD BEACH	E		Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	PC () Del OPPENHEIM, LEILA 817 S. FEDERAL DEERFIELD BEACH	A		Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	ST () Del CODAZZI, SAMANT 817 S. FEDERAL DEERFIELD BEACH	HA		Title: Name: Address: City-St-Zip:	()	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GABRIELLA FERRARIO DVS 09/03/2005