

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000061502

**FILED**  
**May 17, 2006**  
**Secretary of State**

**Entity Name:** CINGLEN, INC.

**Current Principal Place of Business:**

1027 SOUTH DILLARD ST  
WINTER GARDEN, FL 34787 US

**New Principal Place of Business:**

820 S. RONALD REAGAN BLVD  
SUITE 110  
LONGWOOD, FL 32750 US

**Current Mailing Address:**

215 PINEDA STREE, UNIT 121  
LONGWOOD, FL 32750

**New Mailing Address:**

820 S. RONALD REAGAN BLVD  
SUITE 110  
LONGWOOD, FL 32750

**FEI Number:** 59-3522419

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COFFIELD, GLEN E  
215 PINEDA STREET  
UNIT 121  
LONGWOOD, FL 32750 US

**Name and Address of New Registered Agent:**

COFFIELD, GLEN E  
820 S. RONALD REAGAN BLVD  
SUITE 110  
LONGWOOD, FL 32750 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: GLEN EVAN COFFIELD

05/17/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: COFFIELD, GLEN E PRESIDE  
Address: 215 PINEDA ST #121  
City-St-Zip: LONGWOOD, FL 32750

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSTD (X) Change ( ) Addition  
Name: COFFIELD, GLEN E PRESIDE  
Address: 820 S. RONALD REAGAN BLVD SUITE 110  
City-St-Zip: LONGWOOD, FL 32750

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: GLEN EVAN COFFIELD

MR.

05/17/2006

Electronic Signature of Signing Officer or Director

Date