

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000027700

Entity Name: STEPHEN H. CYPEN, P.A.

FILED
Jan 07, 2005
Secretary of State

Current Principal Place of Business:

825 ARTHUR GODFREY ROAD
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 402099
MIAMI BEACH, FL 331400099

New Mailing Address:

FEI Number: 65-1052631

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CYPEN, STEPHEN H
825 ARTHUR GODFREY ROAD
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CYPEN, STEPHEN H
Address: 825 ARTHUR GODFREY ROAD
City-St-Zip: MIAMI BEACH, FL 33140

Title: PVTS () Delete
Name: CYPEN, STEPHEN H
Address: 825 ARTHUR GODFREY RD
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PVTS (X) Change () Addition
Name: CYPEN, STEPHEN H
Address: 825 ARTHUR GODFREY ROAD
City-St-Zip: MIAMI BEACH, FL 33140

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: STEPHEN H. CYPEN

PVTS

01/07/2005

Electronic Signature of Signing Officer or Director

Date