EPARMENT OF STATE 01 OCT 22 AH 11: 19 670766 **DOCUMENT #** 1. Corporation Name SUNCOAST CYCLE ENTERPRISES, INC. Principal Place of Business Mailing Address 935 HARBOR LAKE CT 935 HARBOR LAKE CT SAFETY HARBOR FL 34695 SAFETY-HARBOR FL 34695 If above addresses are incorrect in any way, line through incorrect information and enter correction below 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable Date Incorporated or Qualified
To Do Business in Florida 05/21/1980 5. FEI Number 1025-B 1025-B Applied For 59-2003394 \$8.75 Additional Fee required for a Certificate of Status CERTIFICATE OF STATUS DESIRED 34695 34695 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each Title(s) City / State / Zip 34688 1955 SADDLE HILL AD S. 2963 POST ROCK P PAPADAKIS, THOMAS M DUNEDIN, FL 00000 TARPON SPRINGS, FL 1955 SADDLE HILL RDS. 2963 POST ROCK CT ST DUNEDIN, FL 00000 34688 PAPADAKIS, SANDRA TARPON SPRINGS, FL. **600004670736--**-11/07/01--01040--020 ****150.00 ****150.00 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent PAPADAKIS, THOMAS M Street Address (P.O. Box Number is Not Acceptable) -935 HARBOR LAKE CT-1025-B HARBOR Dn Suite, Apt. #, Etc. -SAFETY HARBOR FL 34695 State Zip Code FL 34695 SAFETY HARBOR 10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. REGISTERED AGENT MUST SIGN this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. 10-15-01 727-439-9256 C THOMAS. M. PAPADAKIS SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

242

October 15, 2001

Florida Department of State Department of Corporations Katherine Harris

Dear Sir / Madame:

Please find our application for reinstatement, document #670766. I am writing to inform you that I had not received any of the prior uniform business reports or any notifications for renewal. The corporation was moved in May of 2001, and also we have moved into a newer home. Some how some way we never received the notifications until this one arrived today (10-15-01) and the currant tenant at our prior address telephoned us and I picked it up. I apologize for the inconvenience and would appreciate your consideration on removing the reinstatement fee. I have enclosed \$150.00 for the renewal and if there is anything else please contact me at our new address (listed below) or feel free to phone me.

Thank You

Thomas M. Papadakis (pres)

Suncoast Cycle Enterprises Inc. 1025-B Harbor Lake Dr.

Safety Harbor, Fl. 34695

727-726-0567

cell 727-439-9256