

F 97000006308

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: EAST COAST CYCLES INC.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida",  
"Certificate of Existence", and check are submitted to register the above referenced foreign corporation to  
transact business in Florida.

Please return all correspondence concerning this matter to the following:

Dennis Katona 600002352956--7  
(Name of Person) -11/20/97-01067-004  
\*\*\*\*131.25 \*\*\*\*131.25  
EAST COAST CYCLES INC.  
(Firm/Company)  
7915 Leo Kidd Ave  
(Address)  
Port Richey FL 34668  
(City/State/Zip)

W97-26259

Should you need to call someone concerning this matter, please call:

Dennis Katona at (813) 843-8415  
(Name of Person) (Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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12/1



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

November 20, 1997

DENNIS KATONA  
EAST COAST CYCLES, INC.  
7915 LEO KIDD AVE.  
PORT RICHEY, FL 34668

SUBJECT: EAST COAST CYCLES, INC.  
Ref. Number: W97000026259

We have received your document for EAST COAST CYCLES, INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida corporation or a foreign corporation authorized to transact business in Florida. Please correct the document.

We can find no record of a corporation or fictitious name filing with the name PONY EXPRESS LIMO INC.

Please briefly describe the nature of the corporation's business in the space provided in line 8 of the application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers  
Document Examiner

Letter Number: 797A00055717

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. EAST COAST CYCLES INC.  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. P.A. 3. 25-1761267  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 1-1-95 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. Dennis Katona c/o East Coast Cycles Inc.  
7915 Leokidd Ave Port Richey, FL 34668  
(Current mailing address)

8. To sell motorcycle parts, customwork, motorcycle repair, motorcycle sales  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  
M+R Pony Express  
Name: Linda Inc. Maria V Adams

Office Address: 7853 Leokidd Ave  
Port Richey, Florida, 34668  
(Zip code)

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Maria V. Adams  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

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DIVISION OF CORPORATIONS

**A. DIRECTORS (Street address only - P.O. Box NOT acceptable)**

Chairman: Dennis Katona

Address: 9141 Sterling Lane Port Richey FL  
34668

Vice Chairman: Same as above

Address: \_\_\_\_\_

Director: Same as above

Address: \_\_\_\_\_

Director: Same as above

Address: \_\_\_\_\_

**B. OFFICERS (Street address only - P.O. Box NOT acceptable)**

President: Dennis Katona

Address: 9141 Sterling Lane  
Port Richey FL 34668

Vice President: Same as above

Address: \_\_\_\_\_

Secretary: Same as above

Address: \_\_\_\_\_

Treasurer: Same as above

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Dennis Katona  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Dennis Katona  
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

OCTOBER 30, 1997

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

EAST COAST CYCLES, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania  
and remains a subsisting corporation so far as the records of this office  
show, as of the date herein.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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IN TESTIMONY WHEREOF, I have  
hereunto set my hand and caused  
the Seal of the Secretary's  
Office to be affixed, the day  
and year above written.

A handwritten signature in dark ink, appearing to read "G. H. Kane".

Secretary of the Commonwealth

DPOS