

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # L50140

1. Corporation Name

AMERICAN CYCLE, INC.

Principal Place of Business	,
4033 NE 10TH AVE	5

May 04, 1999 8:00 am Secretary of State

05-04-1999 90157 023 ***150.00



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Principal Place	e of Business	Mailing Address	~			-		Blatt Afalt Blått at	Gij BiBii Jaal
4033 NE 10TH AVE 5851 NORTHEAST 7TH AVI OAKLAND PARK FL 33334 FORT LAUDERDALE FL 33					DO NOT WE	NTC IN TUI	, e space		
US		•				DO NOT WR 3. Date Incorporated or Qualifect		S SPACE	
	•			_		02/09/1990	J		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		App	olied For
21	المحاج أبار أرار والمستر	26		<i>,</i>		65-0249289	2	Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 A	
22		27				5. Certificate of Citatus Desired		Fee Rec	quired
City & Stat	. ,	City & State				6. Election Campaign Financing Trust Fund Contribution	' □	\$5.00 r Added to	
Zip	Country	Zip	Co	untry		8. This corporation owes the cur	rrent vear h		
	25	29	30			Personal Property Tax.	nent your n		□No
24	9. Name and Address of Curre		30	$\overline{1}$		(10) Name and Address of New	Registered	d Agent	
	5. Harro and Adainso of Carro		***	81 Nai	ne ,			R	
FOR	ESHA, WILLIAM E.				W	illiam E Fones	14 3	<u> </u>	
	I NE 7TH AVE.				et Addre	ess (P.O. Box Number is Not Accept	ve	008, 8-	12-67
FUR	T LAUDERDALE FL 33334			83		FT. LAUd. FL.	3333	4	
	•			84 City	,		F	85 Zip C	Code
11 Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida St	atutes, the	above-nan	ed corpo	ration submits this statement for the	e purpose o	of changing its	registered
office or r	registered agent or both in the State	of Florida, Such channe wa	is authorize	ad hv the c	orporation	n's board of directors. I hereby acce	ept the app	ointment as reg	jisterea
agent La	m familiar with, and accept the oblig	ations of Section 607.0505.	Florida Sta	tutes.	·	,			
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14) I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.