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## 2001 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # M9500000069  1. Entity Name .								
CYCLO INDUSTRIES, LLC, L.C.						FIL	_ED	
Principal Place of Business Mailing Address 10190 RIVER SZOE DR.					2001 MAY -2 PM 3: 02			
PA	1 BEACH GANDE	DR.	2	_		DIVISION OF C	ORPORA	TIONS
111211	DEACH GANUE	$n\omega$ , $n = 3$	3.4	0		TALLAHASS	SEE, FLO	RIDA
Principal Place of Business     3. Mailing Address								
Spm E Suite, Apt. #, etc.		SAME. Suite, Apt. #, etc.			-	DO NOT WRITE IN TH	HIS SPACE	
01. 5.01							· .	Applical Con
City & State		City & State			4. FEI Numb	5-1945375	/	Applied For Not Applicable
Zip	Country	Zip	Cour	ntry	5. Certificate	of Status Desired	<b>\$5.00</b> . Fee Requ	Additional uired
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New Register	<u> </u>	
	CT corporATI	(m)		Name				
1200 S. PINE ZSLAND RD.			D	_ Street Address	s.(P.O.,Box,Numb	er is Not Acceptable)	<del>-</del>	
	SURTE 250	20-70772 7	_		-			
	PLANTATION, FL 33324			City		F	Zip C	ode
	named entity submits this statement for		g its register	ed office or regist	tered agent, or bo	th, in the State of Florida.	I	<u>.</u>
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (	(NOTE Registere	ed Agent signature requi	red when reinstating)	DAT	TE	
	<u>.</u>		NOW!!	EEE 18 650 00	n .			
				FEE IS \$50.00 to Department				
	-111140(N) O NEUE	EDO 1151 (DEDO		o		ADDITIONS/CHANG	NEC .	
9. TITLE	MANAGING MEMBI		10.	E		ADDITIONS/CHANC	☐ Chang	je Addition
NAME	SATZSH SHAI		NAM		1 :	00004336	5781	1
STREET ADDRESS   CITY-ST-ZIP				EET ADDRESS '-ST-ZIP	<del></del> ·	-05/31/01	-01091	-019
TITLE	P.B. GAMOENS		TITL	<del></del>		<del>****\$50.8</del> 0 55 N	」 → ★ 本 本 本 本 本 本 本 本 本 本 本 本 本 本 本 本 本 本	e Addition
NAMÉ	MEMBER			l		23.00	<i>)</i>	55.00
STREET ADDRESS	10190 RZUFRS	FOE DR.	STR	EET ADDRESS				
CITY-ST-ZIP	NAJEEB KAA 10190 RZVERS P.B. GANDENS MEMBER	FL 33410	TITU	'-ST-ZIP			☐ Chang	e 🔲 Addition
TITLE Name	PAT RUSTKE		NAM	- 1			Grang	
STREET ADDRESS	10190 NEUENSTA	OE DR.		EET ADDRESS		-		, [
CITY-ST-ZIP	P.B. GANDENS MEMBER	, Fz 3 <u>3416</u>	Z CITY	'-ST-ZIP			Choose	Addition
TITLE Name	MFMBFUL SPANTAN CHFM	☐ Delete	TITU NAM	ļ.	•		☐ Chang	e
STREET ADDRESS	10190 RZUENSZAGE	DR.		EET ADDRESS				1
CITY-ST-ZIP	P.B. GARDENS		CITY	'-ST-ZIP	<del>.</del>			
TITLE .		Delete	TITLI N <b>a</b> m				☐ Chang	e 🔲 Addition
name Street autoress				EET ADDRESS		Lر		
CITY-ST-ŽIP			CITY	'-ST-ZIP				
TITLE 1-		☐ Delete	TITLI			-	☐ Chang	e 🗌 Addition
NAME STREET ADDRESS		•	NAM STRE	EET ADDRESS .				
CITY-ST-ZIP				-ST-ZIP				
11.   hereby o	certify that the information supplied with	this filing does not qualify	y for he exe	mption stated in S	Section 119.07(3)	i), Florida Statutes. I further	certify that the	e information
indicated limited lial	on this report is true and accurate and bility company or the receiver or trustee	yiat my signature snail ha emplowered to execute t	ave ir e same his report as	s required by Cha	pter 608, Florida	, mar i am a managing men Statutes.	noci di mana	igor or the
	was Salut I	hun .		. ,4 ^				
SIGNAT	URE:			SHAM	RENTATIVE	Date	Daytime Phone	
	VIVENIUME AND LIFED OR PRIMITED NAME OF	. GODDING MANAGING MEMBER.	MOUNT VEK, UK	COLUMN TO MENNE		MOIO	Daywing Filling	