

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Jun 23, 2005 8:00 am
Secretary of State

06-23-2005 90051 010 *****55.00

DOCUMENT # M95000000069

1. Entity Name

CYCLO INDUSTRIES, LLC, L.C.



Principal Place of Business

10190 RIVERSIDE DRIVE
PALM BEACH GARDENS FL 33410

Mailing Address

10190 RIVERSIDE DRIVE
PALM BEACH GARDENS FL 33410



2. Principal Place of Business

401 MAPLEWOOD DRIVE

3. Mailing Address

401 MAPLEWOOD DRIVE

Suite, Apt. #, etc.

SUITE 18

Suite, Apt. #, etc.

SUITE 18

City & State

JUPITER FL

City & State

JUPITER FL

Zip

33458

Country

Zip

33458

Country

1st MOORE

CR2E083 (10/04)

4. FEI Number

35-1945374

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SLAVIN, MICHAEL A
4440 PGA BLVD., STE 402
PALM BEACH GARDENS FL 33410

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2005

9. MANAGING MEMBERS / MANAGERS

TITLE C ☐ Delete
NAME PESIN, LAWRENCE
STREET ADDRESS 10190 RIVERSIDE DRIVE
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

TITLE CEO ☐ Delete
NAME FLEISHMAN, EUGENE
STREET ADDRESS 10190 RIVERSIDE DRIVE
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS / CHANGES

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 401 MAPLEWOOD DRIVE SUITE 18
CITY-ST-ZIP JUPITER FL 33458

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 401 MAPLEWOOD DRIVE SUITE 18
CITY-ST-ZIP JUPITER FL 33458

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

6/15/05

561.775.9600