2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P000000 FENTHY Name MAMAJOC'S CYCLES + S				FILED			
				01 MAY -8 PM 3: 15			
Principal Place of Business	Mailing Address						
281 46th Street Gulfside	281 46th Stree			SECRETIANYTOFISTATE			
Marathon, Florida 33050	Marathon, Flor	ida	33050	TALLAHAS SEE, FLORID.	Д		
2. Principal Place of Business	3. Mailing Address						
6363 Overseas Highway P.O. Box 50022		5					
Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPA	CE		
City & State	City & State			4. FEI Number	TA	pplied For	1
Marathon, Florida	Marathon, Flor	ida		65-1029896	N	ot Applicable	
Zip - Country 20444	Zip	Count	try		.75 Ad		
33050 MONROE	33050	· 		Fe	e Require	ed	-
6. Name and Address of Current F	registered Agent		Name	7. Name and Address of New Registered Age	JIIL		
				EL & UTRERA. P.A.			ļ
SPIEGEL & UTRERA, P.A.			Street Address (1	ress (P.O. Box Number is Not Acceptable) 40 Southwest 22 Street			
343 Almeria Avenue							
Coral Gables, Flori	da 33134	ļ	4th F		Zip Coo	la	ł
,			City Miami	Florida FL	3314		
8. The above named entity submits this statement for Splegel a Utrera,	the purpose of changing its re	gistere	ed office or register	ed agent, or both, in the State of Florida.			ĺ
spiegel & utrera,	1-12.			- m C	2_	00/	
SIGNATURE By: Otalea	the same			fray 01		507	
Social Part of Control of the State of the S	e President		Agent signature required				ł
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	After MAY 1, 200 Make Check Payable	Fee		Trust Fund Contribution.	Adde	00 May Be d to Fees	
11. OFFICERS AND C	DIRECTORS	12.		ADDITIONS/CHANGES TO OFFICERS AND DI			6
me President, TD	☐ Delete	TITLE	1	L] Change	☐ Addition	5
NAME STREET ADDRESS 6363 OV e.L.S. 15	The d	NAME	ET ADORESS				7
CITY-ST-ZIP MARATHON 7/	33050		ST-ZIP			i	CR2E034 (11/00
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		NAME	:	200004271	32	20	
STREET ADDRESS 6363 QUEKSEAS	HWY		ET ADDRESS	-05/19/81	1111113	3 012 1	
NAME STREET ADDRESS 6363 OVERSEAS CITY-ST-ZIP MARATHON, 7	1. 33050	CITY	ST-ZIP	****150_00	***	@ <u>#15U_UU</u>	i
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CITY-ST-ZIP			ST-ZIP				
		. R					١
 I hereby certify that the information supplied with indicated on this report or supplemental report is of the corporation or the receiver or trustee empor changed, or on an attachment with an address, w 	true and accurate and that my wered to execute this report a:	ne exer	nption stated in Se	iame legal effect as if made under cath; that I am i	an omcei	or director 1	1