

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

05 MAY 19 11 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000009726 (8)**

The Corporation Name:

LUONGO CYCLE, INC.

Principal Office Location:

**7641 PINES BLVD.
PEMBROKE PINES FL 33024**

Mailing Address:

**7641 PINES BLVD.
PEMBROKE PINES FL 33024**

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation/Qualification: **01/28/1994** 3a. Date of Last Report:

01/28/1994

4. FEI Number:

15-0477131

Applied For:

Not Applicable

5. Certificate of Status Desired: ☐ **\$8.75 Additional**

Fee Required

6. Election Campaign Financing

Trust Fund Contribution: ☐ **\$5.00 May Be**

Added to Fees

8. This corporation has liability for intangible tax under S. 199.012

Florida Statute: ☐ Yes ☒ No

2. Principal Office Location:

21

2a. Mailing Address:

26

22. State Agent #:

22

27. State Agent #:

27

23. City:

23

28. City & State:

28

24. Country:

24

29. Country:

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MCKINLEY, CHARLES W IV
1215 S.E. 2ND AVE., STE. 102
FT. LAUDERDALE FL 33316**

81. Name:

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

83.

84. City:

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.05(2) and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office (or registered agent) to both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Sections 607.05(5) Florida Statutes.

SIGNATURE

Signature of Current Registered Agent (If Applicable)

Signature of New Registered Agent (If Applicable)

Signature of Officer or Director (If Applicable)

Signature of Officer or Director (If Applicable)

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Signature of Officer or Director (If Applicable)

Signature of Officer or Director (If Applicable)

SIGNATURE:

Thomas Luongo

THOMAS LUONGO

5-12-95

902-3300

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1995



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
Secretary of State

APPROVED
AND
FILED

DOCUMENT # P94000011237 (2)

1. Corporation Name

THE FINAL APPROACH CORP

5/15/95 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Office Address

8119 MIZNER LANE
BOCA RATON FL 33433

3. Mailing Address

8119 MIZNER LANE
BOCA RATON FL 33433
4225 Tranquility Dr.
Highland Beach, FL 33487

3. Date of Incorporation
02/04/1994

3a. Date of Last Report

4. Filing Number
65-0471241

4a. Appointed For
Next Appointment

21. Principal Office Address

22. Mailing Address

23. City & State

24. ZIP

25. Mailing Address

26. Mailing Address

27. City & State

28. ZIP

29. ZIP

30. City & State

5. Certificate of Status Granted

\$8.75 Additional
Fee Required

6. Election Certificate Granted

\$5.00 May Be
Added to Fees

8. Does corporation have liability for alternative tax under 2032(a)(1)?
Yes ☐ No ☒

9. Name and Address of Current Registered Agent

BROOKS, EDITH
8119 MIZNER LANE
BOCA RATON FL 33433

10. Name and Address of New Registered Agent

81. Name
Edith Spahr
82. Street Address
4225 Tranquility Dr.
83. City & State
Highland Beach
84. ZIP
FL 85. ZIP
33487

11. The undersigned, being duly sworn, depose and say that the foregoing is a true and correct copy of the original of the document filed for filing with the Secretary of State, and that the same is a true and correct copy of the original of the document filed for filing with the Secretary of State.

Signature
Edith Brooks Spahr

12. D
BROOKS, EDITH
8119 MIZNER LANE
BOCA RATON FL 33433

13. Agent's Signature

NAME

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