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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P95000047274 (2)

DOCUMENT # P95000047274 (2) 1. Corporation Name JAMES N DEAN'S ISLAND CYCLE, INC.							<u> </u>				
Principal Place of Business Mailing Address											
6677 OVERSEAS HWY. MARATHON FL 33050 MARATHON FL 33050											
							3. Date Incorporated or Qualified 06/14/1995	3a. Date of Last 06/14/9	5		
			Mailing Address				4. FEI Number		Applied For Not Applicable		
21 26 26 26 26 27 28 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20			Suite, Apt. #, etc.				65-058-7469	\$8.75 Additional			
22]							Certificate of Status Desired	7	e Required		
City & State			City & State				Election Campaign Financing Third Coatribution	1 1	00 May Be		
23	Country	28	n	7 6	Country	,	Trust Fund Contribution 8. This corporation has liability for i	Auc	s 199.032		
Ζιρ 24	Country Zip 30			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Florida Statutes Yes No						
	9. Name and Address of Curr	rent Register	ed Agent		<u> </u>	T.	10. Name and Address of New R	egistered Agent			
					81	Name					
MAESTAS, JAMES 6677 OVERSEAS HWY.					82	Street A	Address (P.O. Box Number is Not Acceptable)				
					83	83					
MARATHON FL 33050					84 City 85 Zip Code			Zin Codo			
					84	City		FL B5	zip code		
or registere familiar wit	o the provisions of Sections 607.05 ad agent, or both, in the State of Fi h, and accept the obligations of, Si	orida. Such d	hange was authoriz	red by ti	above- ne conf	named co poration's	orporation submits this statement for the pur board of directors. I hereby accept the app	pose of changing fis pintment as register	s registered office ed agent. I am		
3						nt signature ri	equired when reinstating)	DATE DIDECT	1000 IN 40		
12.	OFFICERS AND DIRECTORS DELETE			13.			ADDITIONS/CHANGES TO OFF	K Chang			
TITLE NAME	D Maestas, James		□ bteric		.2 NAME		P/T/S/M Maestas, James	AL 5.12.13			
STREET ADDRESS	ACCALLY COPINI DD. #4 605						13 Man-O-War Rd.				
CITY-ST-ZIP	KEY COLONY BEACH FI				4 CITY-		Marathon, FL 33050				
TITLE			DELETE	2	. 1 TITLE			☐ Chang	e 🔲 Addition		
NAME				2	2 NAME						
STREET ADDRESS				2	3 STREE	T ADDRESS					
CITY-ST-ZIF					4 CITY-			Chang	e [] Addition		
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NAME					2 NAME						
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CITY - ST - ZIP TITLE			DELETE		1.4 CIII - 1. 1 TITLE			Chang	e Addition		
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CHTY - ST - ZIP			·	!	5.4 CITY -	ST-ZIP					
TITLE			DELETE	ľ	6 1 TITLE			Chang	ge 🔲 Addition		
NAME				_ ['	6.2 NAME						
STREET ADDRESS					5.3 STREE	T ADDRESS	3				
						CF 3/F	1				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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.

SIGNATURE:

AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305) 289-0076

Daytinie Phone #