

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000085768 (6)**

1. Corporation Name

CYCLE CONCEPTS, INC.

Principal Place of Business

**4725 SW 74 AVE
MIAMI FL 33155**

Mailing Address

**4725 SW 74 AVE
MIAMI FL 33155**



2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

22

City & State

23

Zip Country

24

25

26

Suite, Apt. #, etc.

27

City & State

28

Zip Country

29

30

9. Name and Address of Current Registered Agent

**CRAKER, WILLIAM J
4725 SW 74 AVE
MIAMI FL 33155**

3. Date Incorporated or Qualified

11/08/1995

3a. Date of Last Report

4. FEI Number

65-0619150

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 interjurisdictional tax under s. 199.032,
Florida Statutes. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

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 607.0532 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I, the corporation's board of directors, hereby accept the appointment as registered agent. I am familiar with and accept the provisions of Section 607.0532, Florida Statutes.

SIGNATURE

3/18/96
(Date)

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	CRAKER, WILLIAM L	
STREET ADDRESS	7100 SW 59 STREET	
CITY, ST, ZIP	MIAMI FL 33143	
TITLE	D	☐ DELETE
NAME	CORTINA, RODOLFO	
STREET ADDRESS	2152 SW 10 STREET	
CITY, ST, ZIP	MIAMI FL 33155	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. NAME	☐ Change ☐ Addition
6. STREET ADDRESS	
7. CITY, ST, ZIP	
8. NAME	☐ Change ☐ Addition
9. STREET ADDRESS	
10. CITY, ST, ZIP	
11. NAME	☐ Change ☐ Addition
12. STREET ADDRESS	
13. CITY, ST, ZIP	
14. NAME	☐ Change ☐ Addition
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. NAME	☐ Change ☐ Addition
18. STREET ADDRESS	
19. CITY, ST, ZIP	

14. I do hereby certify that the information supplied on 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 chairman, officer or agent with no address.

SIGNATURE: **X**

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WILLIAM L. CRAKER

3/18/96 (305) 265-1157
(Date) (Phone)

CR2E034 (12/95)