FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Jun 09 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mertham 🗻 Secretary of State **ÅNNUAL** REPORT Secretary of State DIVISION OF CORPORATIONS 1998 P97000016213 (5) DOCUMENT # CYCLE NATION USA, INC. Mailing Address Principal Place of Business 805-A WEST BROWARD BLVD 805-A WEST BROWARD BLVD FT LAUDERDALE FL 33312 FT LAUDERDALE FL 33312 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/15/1997 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For Not Applicable 21 Suite, Apt. #, etc Suite, Apl. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees Country Zip This corporation owes or has paid the current year Intardible Personal Property Tax due June 30. Yes 29 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MONESI, PATRICK J 805-A WEST BROWARD BLVD 62 Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33312 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 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 hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELETE 1 1 TITLE Change Addition TITLE MONESI, PATRICK J NAME 1.2 NAME **805-A WEST BROWARD BLVD** STREET ADORESS 1.3 STREET ADDRESS FT LAUDERDALE FL 33312 CITY-ST-ZIP 14 CITY-ST-ZIP DELLITE ☐ Change Addition TITLE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CHY- ST- ZIP DEFFE Addition Change TITLE 31 TITLE NAME 3 2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4 CHY-ST-ZIP DELFTE Change Addition TITLE 4.1 HILE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CHY - \$1 - 7IP DELFTE Change Addition TITLE 5.1 THEF 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST- ZIP

DELETE

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6.2 NAME

14. Thereby cortify 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 annual report or supply neutral annual report is true and accurate and that possignature shall have the same logal effect as if made under eath; that I am an officer or director of the corporation of the

6.3 STREET ADDRESS

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

1/9P 954-728-8186

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Change

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