

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

FILED  
Apr 17 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P97000030130 (3)

1. Corporation Name  
CYCLE'N PLACE, INC.

Principal Place of Business  
SHORELINE VILLAGE MALL #108  
HWY. 98 & GULF SHORE DRIVE  
DESTIN FL 32540

Mailing Address  
P.O. BOX 842  
DESTIN FL 32540

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
04/02/1997

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country  
25  
2a. Mailing Address  
26 758 VINTAGE CIRCLE  
27 Suite, Apt. #, etc.  
28 City & State  
29 DESTIN FLORIDA  
30 Zip  
31 USA

4. FEI Number  
59-3441852  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees  
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

8. Name and Address of Current Registered Agent

JOHN, JESSICA R  
4077 INDIAN BAYOU NO.  
DESTIN FL 32541

10. Name and Address of New Registered Agent

81 Name  
DIANA HOPE  
82 Street Address (P.O. Box Number is Not Acceptable)  
4022 LAUREN COURT  
83  
84 City  
DESTIN, FLORIDA FL 85 Zip Code  
32541

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.

SIGNATURE *Diana Hope*  
Signature, typed or printed name of registered agent and title if applicable

4-9-98

DATE

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT	<input type="checkbox"/> DELETE
NAME	DIANA HOPE	
STREET ADDRESS	4022 LAUREN COURT	
CITY-ST-ZIP	DESTIN, FL 32541	
TITLE	VICE PRESIDENT	<input type="checkbox"/> DELETE
NAME	KIM KING	
STREET ADDRESS	758 VINTAGE COURT DESTIN , FL 32541	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify 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 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 *Diana Hope* DIANA HOPE PRESIDENT 4-9 APRIL 9, 1998

CR2E034 (10/97)