

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P98000076445**

1. Corporation Name
U.S. CYCLE, INC.

Principal Place of Business
**737 HOLLYWOOD BOULEVARD
HOLLYWOOD FL 33019**

Mailing Address
**737 HOLLYWOOD BOULEVARD
HOLLYWOOD FL 33019**

FILED
Mar 03, 1999 8:00 am
Secretary of State

03-03-1999 90128 049 ***158.75



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/01/1998

4. FEI Number

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 owes the current year intangible
Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**GANZ, THOMAS J
737 HOLLYWOOD BOULEVARD
HOLLYWOOD FL 33019**

10. Name and Address of New Registered Agent

81 Name **GEORGE GWIAZDOWSKI**
82 Street Address (P.O. Box Number is Not Acceptable)
10151 SW 17TH CT
83
84 City **DAVIE** **FL** 85 Zip Code **33324**

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

George Gwiazdowski

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/13/99
DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	GWIAZDOWSKI, GEORGE	
STREET ADDRESS	10151 SW 17TH COURT	
CITY-STATE-ZIP	DAVIE FL 33324	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	CRUTCHER, LARRY A	
STREET ADDRESS	2986 N.W. 94TH AVENUE	
CITY-STATE-ZIP	CORAL SPRINGS FL 33065	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	GANZ, THOMAS J	
STREET ADDRESS	737 HOLLYWOOD BOULEVARD	
CITY-STATE-ZIP	HOLLYWOOD FL 33019	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

SIGNATURE:

George Gwiazdowski
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/99 **954-473-6020**
Date Daytime Phone #

CR2E034 (1/98)