


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005 08:00 AM
Secretary of State

DOCUMENT # M14129
 1. Entity Name
VICTOR'S BICYCLE & SUPPLIES, INC.



Principal Place of Business C/O VICTOR M. ABREU 3434 N.W. 27TH AVENUE MIAMI, FL 33142	Mailing Address C/O VICTOR M. ABREU 3434 N.W. 27TH AVENUE MIAMI, FL 33142
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04012005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FE Number 59-2524911	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 ABREU, OFELIA
 420 KINGS POINT DR. 926
 SUNNY ISLAND BCH, FL 33160

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. I am familiar with and accept the obligations of registered agent.

SIGNATURE: _____ DATE: _____
(Signature of current or former name of registered agent or both and must include) (NOTE: Registered Agent signature required when changing)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
 Just Fund Contribution **\$5.00** May Be Added to Fees

100000302651
 04/13/05-80075-025 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY, STATE	ST ABREU VICTOR M 400 KINGS POINT DR. #926 SUNNY ISLAND BCH., FL 33160
TITLE NAME STREET ADDRESS CITY, STATE	P ABREU OFELIA 400 KINGS POINT DR. #926 SUNNY ISLAND BCH., FL 33160
TITLE NAME STREET ADDRESS CITY, STATE	
TITLE NAME STREET ADDRESS CITY, STATE	
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TITLE NAME STREET ADDRESS CITY, STATE	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(ii), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 any sales employee designated to execute this report as required by Chapter 607, Florida Statutes, and that my home appears in Block 13 or Block 11 if changed or on an attachment with an address will all other filers approved.

SIGNATURE: *Ofelia Abreu* **4-11-05**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR