

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000023667

1. Entity Name

AMERICAN VICTORY MOTORCYCLES, INC.

FILED

00 OCT -2 PM 2:43

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business

5320 S.W. 20TH STREET
PLANTATION FL 33317

Mailing Address

5320 S.W. 20TH STREET
PLANTATION FL 33317

2. Principal Place of Business

3. Mailing Address

7809 W. COMMERCIAL BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAMARAC FLORIDA

REINSTATEMENT

4. FEI Number

65-0903530

Applied For
Not Applicable

Zip

Country

Zip

Country

33351 BROWARD

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~LOOMAR, L. GREGORY ESQ.~~
~~1152 NORTH UNIVERSITY DRIVE~~
~~REMBROKE PINES FL 33024~~

Name

GEORGE L. GOBER

Street Address (P.O. Box Number is Not Acceptable)

7809 W. COMMERCIAL BLVD.

City

TAMARAC

FL

Zip Code

33351

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.

SIGNATURE

[Signature]

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

(NOTE: Registered Agent signature required when reinstating)

9/28/00

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	D, P. VARONA, PEDRO A	5320 S.W. 20TH STREET	PLANTATION FL 33317	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	D, P. VARONA, BEVERLY	5320 S.W. 20TH STREET	PLANTATION, FL 33317	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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10/10/00-01011-022
****750.00 ****750.00

KE

13. 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 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
BEVERLY A. VARONA

VICE PRESIDENT

9/28/00

DATE

951-792-8824

DAYTIME PHONE #