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COVER LETTER

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TO: New Filing Section Division of Corporations SECRETARY OF STATE TALLAHASSEE, FRORIDA

SUBJECT: ISLAND CYCLES INC

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

YEHUDA PERETZ	
·	(Name of Person)
ISLAND CYCLES INC	
	(Firm/Company)
PO BOX 1437	
	(Address)
OCEAN CITY, MD 2184	43
	(City/State and Zip code)
For further information concerning	this matter, please call:
YEHUDA PERETZ	at (443) 880-012
(Name of Person)	(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Enclosed is a check for the following	amount	owing	follo	the	for	check	is a	osed	Enc
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\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy
			Certinea Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(Enter name of c	CYCLES INC orporation; must include "INCORPORATED)," "COMPANY," "CORPORATION,"
*inc.," "Co.," "C	orp," "lne," "Co," or "Corp.")	
N/A		<u></u>
(If name unavail	able in Florida, enter alternate corporate nam	ne adopted for the purpose of transacting business in Florida)
2. MARYLAN	ND	82-0539770
	under the law of which it is incorporated)	(FEI number, if applicable)
4, APRIL 18,	, 2002	PERPETUAL
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. N/A		·
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)
₇ 10979 Mai	insail Dr , HOLLYWOOD, FI	L 33026
· · · · · · · · · · · · · · · · · · ·	(Principal office ad	ldress)
PO BOX 1	437, OCEAN CITY, MD 218	843
	(Current mailing ac	ldress)
8. MOPED F	RENTAL	
	s) of corporation authorized in home state or	country to be carried out in state of Florida)
· ·	et address of Florida registered agent: (P.	
9. Ivanie and sirec		
Name:	YEHUDA PERETZ	
Office Address:	10979 Mainsail Dr	
	HOLLYWOOD	
	(City)	(Zip code)
10. Registered a	gent's acceptance:	?5
Having been nam	ed as registered agent and to accept ser	vice of process for the above stated corporation at the place
designatea in this further agree to c	appucation, I nereby accept the appoint comply with the provisions of all statutes	tment as registered agent and agree to act in this capacity. I relative to the proper and complete performance of my duties,
and I am familiar	with and accept the obligations of my p	position as registered agent.

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman: N/A	
Address: N/A	
Vice Chairman: N/A	
Address: N/A	
Director: N/A	
Address: N/A	
	·
Director: N/A	S 8
Address: N/A	<u> </u>
B. OFFICERS	
President: YEHUDA PERETZ	<u> </u>
Address: 10979 Mainsail Dr	> 30
HOLLYWOOD, FL 33026	
Vice President: YEHUDA PERETZ	T COMPANY LINE
Address: 10979 Mainsail Dr	
HOLLYWOOD, FL 33026	
Secretary: YEHUDA PERETZ	
Address: 10979 Mainsail Dr , HOLLYWOOD, FL 33026	<u>-</u>
Treasurer: YEHUDA PERETZ	
Address: 10979 Mainsail Dr , HOLLYWOOD, FL 33026	44 ±
NOTE: 16	
NOTE: If necessary, you may attach an addendum to the application listing additional of	micers and/or directors.
13. (Signature of Director or Officer listed in number 12 of the applica	tion)
14. YEHUDA PERETZ, PRESIDENT	
(Typed or printed name and capacity of person signing application	on)

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT ISLAND CYCLES, INC. IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS OCTOBER 23, 2006.

Paul B. Anderson Charter Division

301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097

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