FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 PM 3:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **H19483** **(7)**

1. Corporation Name

INTERNATIONAL BICYCLE SHOP, INC.

Principal Place of Business	Mailing Address
% WAYNE MORITZ 17 E. PALMETTO PARK ROAD BOCA RATON FL 33432	% WAYNE MORITZ 17 E. PALMETTO PARK ROAD BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/05/1984
3a. Date of Last Report: 03/18/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26: 11708 N.W. 38TH PLACE

4. FEI Number: 59-2459932 ☐ Applied For ☐ Not Applicable

Suite, Apt #, etc — 22
Suite, Apt #, etc — 27: C/O LEON WEISS

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

City & State — 23
City & State — 28: SUNRISE, FL

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Zip — 24 / Country — 25
Zip — 29: 33323 / Country — 30: U.S.A.

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MORITZ, WAYNE 17 E. PALMETTO PARK RD. BOCA RATON FL 33432	81 Name: BRUCE JAY TOLAND ESQ. 82 Street Address (P.O. Box Number is Not Acceptable): 800 BRICKELL AVE. 83: STE 11000 84 City: MIAMI FL 85 Zip Code: 33131

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: Bruce Jay Toland, Esq. — 04/26/95
(Typed or printed name of person signing) (Title if applicable) (Date)
BRUCE JAY TOLAND, ESQ. (Registered Agent signature required on this line)

12. OFFICER AND DIRECTOR		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☑ Change ☐ Addition PTD
NAME	MORITZ, WAYNE	12 NAME	MORITZ, WAYNE
STREET ADDRESS	17 E. PALMETTO PARK RD.	13 STREET ADDRESS	11708 N.W. 38TH PLACE
CITY ST ZIP	BOCA RATON FL	14 CITY ST ZIP	SUNRISE, FL. 33323
TITLE	D	21 TITLE	☑ Change ☐ Addition VSD
NAME	MORITZ, ESTELLE	22 NAME	MORITZ, ESTELLE
STREET ADDRESS	17 E. PALMETTO PARK RD.	23 STREET ADDRESS	11708 N.W. 38TH PLACE
CITY ST ZIP	BOCA RATON FL	24 CITY ST ZIP	SUNRISE, FL. 33323
TITLE		31 TITLE	☐ Change ☑ Addition VD
NAME		32 NAME	WEISS, LEON
STREET ADDRESS		33 STREET ADDRESS	11708 N.W. 38TH PLACE
CITY ST ZIP		34 CITY ST ZIP	SUNRISE, FL. 33323
TITLE		41 TITLE	☐ Change ☑ Addition VD
NAME		42 NAME	MORITZ, MATTHEW
STREET ADDRESS		43 STREET ADDRESS	11708 N.W. 38TH PLACE
CITY ST ZIP		44 CITY ST ZIP	SUNRISE, FL. 33323
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

6/12

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Leon Weiss V.P. DIRECTOR — 04-26-95 — 305-748-3828
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)
LEON WEISS

0259115 CP