

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

FILED
Mar 18 1997 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
 1997



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

DOCUMENT # M03055 (4)
 1. Corporation Name
HIALEAH INTERNATIONAL CYCLE, INC.



Principal Place of Business: **4070 E. 4TH AVENUE HIALEAH FL 33013-2302**
 Mailing Address: **4070 E. 4TH AVENUE HIALEAH FL 33013-2302**

2. Principal Place of Business: **21** Suite, Apt. #, etc.
22 City & State
23 Zip Country
24 **25** **26** **27** **28** **29** **30**

3. Date Incorporated or Qualified: **07/23/1984** | 3a. Date of Last Report: **04/15/1996**
 4. FEI Number: **59-2433262** | 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
 7. This corporation has liability for intangible tax under s. 193.032, Florida Statutes: [] Yes [] No
 10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent
MILLER, RONALD L.
2208 HOLLYWOOD BLVD.
HOLLYWOOD FL 33020

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City
 FL 85 Zip Code

11. Pursuant to the provisions of Sections 007.06(1) and 007.16(3), 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 007.06(5), Florida Statutes.

SIGNATURE: _____ (Name) _____ (Title) _____ (Signature)

12. OFFICERS AND DIRECTORS

TITLE	PSD	<input type="checkbox"/> DELETE
NAME	ROZENBLUM, LEON	
STREET ADDRESS	1042 NE 179 TERR.	
CITY- ST- ZIP	N. MIAMI BEACH FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	ROZENBLUM, LUBA	
STREET ADDRESS	1042 NE 179 TERR.	
CITY- ST- ZIP	N. MIAMI BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	ROZENBLUM LEON	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME		
13 STREET ADDRESS	2887 S.W. 180 TER.	
14 CITY- ST- ZIP	MIRAMAR, FLA. 33029	
15 TITLE	ROZENBLUM LUBA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
16 NAME		
17 STREET ADDRESS	2887 S.W. 180 TER.	
18 CITY- ST- ZIP	MIRAMAR, FLA. 33029	
19 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
20 NAME		
21 STREET ADDRESS		
22 CITY- ST- ZIP		
23 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
24 NAME		
25 STREET ADDRESS		
26 CITY- ST- ZIP		
27 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
28 NAME		
29 STREET ADDRESS		
30 CITY- ST- ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and if by 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 the lessor or lessee of this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or 13 of this filing, in full, or on an attached card with an address.

SIGNATURE: _____ 3-14-1997

CR2E034 (9/96)