


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 16, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # M92274</b> 1. Entity Name <b>BIKES AND MORE, INC.</b>	
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Principal Place of Business <b>3321 SW ARCHER RD</b> <b>GAINESVILLE, FL 32608</b>	Mailing Address <b>3321 SW ARCHER RD</b> <b>GAINESVILLE, FL 32608</b>
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04132007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-2903686</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

**ARTHUR SHOMER**  
**9831 SW 55TH RD**  
**GAINESVILLE, FL 32608**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing) \_\_\_\_\_ DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>STEIN, SHALOM</b> <b>6021 NW 27TH AVE</b> <b>GAINESVILLE, FL 32608</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>SHOMER, ARTHUR</b> <b>9831 SW 55TH RD</b> <b>GAINESVILLE, FL 32608</b>

**DO NOT WRITE IN THIS SPACE**

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 04/24/07-80064-005 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

<b>SIGNATURE:</b> <i>Shalom Stein</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	4/13/07 <small>Date</small>	352 373 362 <small>Daytime Phone #</small>
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