

FILE NOW: FILING FEE IS \$61.25

FILED
May 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # N97000004477 (2)

1. Corporation Name
OSPREY BICYCLE REFITTERS, INC.



Principal Place of Business SUNSET HOUSE 7011 SW 68TH COURT SOUTH MIAMI FL 33143	Mailing Address SUNSET HOUSE 7011 SW 68TH COURT SOUTH MIAMI FL 33143
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3. Date Incorporated or Qualified 08/06/1997	4. FEI Number 650819462	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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

9. Name and Address of Current Registered Agent

VAN HEMERT, TIMOTHY
7011 SW 68TH COURT
SOUTH MIAMI FL 33143

10. Name and Address of New Registered Agent

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

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: *[Signature]* DATE: 4/29/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		1.2 NAME	P/C Timothy VAN HEMERT
STREET ADDRESS		1.3 STREET ADDRESS	7011 S.W. 68th Court
CITY-ST-ZIP		1.4 CITY-ST-ZIP	South Miami, FL- 33143
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	V/D Josephine van Hemert
STREET ADDRESS		2.3 STREET ADDRESS	7011 S.W. 68 Court
CITY-ST-ZIP		2.4 CITY-ST-ZIP	South Miami, FL - 33143
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	S/D GINA Rosellini
STREET ADDRESS		3.3 STREET ADDRESS	7615 S.W. 105 AVE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Miami, FL. 33173
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	D Jilma Lasso
STREET ADDRESS		4.3 STREET ADDRESS	782 N.W. Lejew Rd. Ste 440
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Miami, FL. 33126
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	D Frank Güemes
STREET ADDRESS		5.3 STREET ADDRESS	6045 S.W. 32 Street
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Miami, FL. 33155
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	D Steve van Hemert
STREET ADDRESS		6.3 STREET ADDRESS	6635 S.W. 76 Terrace
CITY-ST-ZIP		6.4 CITY-ST-ZIP	South Miami, FL 33143

14. 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: 4/29/98 DAYTIME PHONE # 305-961-6184

CR2E037 (10/97)

Additions To Officers and Directors

D

Roland Mazzotti
6810 Capilla Street
Coral Gables, Florida

T

Carlos Oro
13517 S.W. 102 Ln.
Miami, Florida 33186