


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000085058

1. Entity Name
 DOWNTOWN BICYCLE, INC.



Principal Place of Business
 400 NORTH FEDERAL HIGHWAY
 FT. LAUDERDALE, FL 33301

Mailing Address
 713 EAST BROWARD BLVD.
 FT. LAUDERDALE, FL 33301

DO NOT WRITE IN THIS SPACE



04162004 No Chg-P CR2E034 (10/03)

4. FEI Number
 65-1036014

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

GENOVESE, GARY S ESQ.
 633 SOUTH FEDERAL HWY.
 FT. LAUDERDALE, FL 33301

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

000000157659
 05/06/04-80036-009 158.75

10. OFFICERS AND DIRECTORS

TITLE	PDTS
NAME	APONTE, MARIO
STREET ADDRESS	713 EAST BROWARD BLVD.
CITY - ST - ZIP	FORT LAUDERDALE, FL 33301
TITLE	V
NAME	APONTE, LUIS
STREET ADDRESS	713 EAST BROWARD BLVD.
CITY - ST - ZIP	FORT LAUDERDALE, FL 33301
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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12. 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 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 addressee, with all other like empowered.

SIGNATURE:  **4/14/04** **954-761-9920**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #