2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000064102

Entity Name: THE 441 BIKE SHOP, INC.

FILED Oct 05, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
CHITTANT Principal Place of Blicipace	NAW Principal Place of Kilsiness:

 2441 N. PINES AVE.
 2528N.MAGNOLIA AVE

 OCALA, FL 34474
 OCALA, FL 34475

Current Mailing Address: New Mailing Address:

 2441 N. PINES AVE.
 2528 N. MAGNOLIA AVE

 OCALA, FL 34474
 OCALA, FL 34475

FEI Number: 65-1133416 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FUCHS, LAWRENCE M ESQ 590 ROYAL PALM BEACH BLVD. ROYAL PALM BEACH, FL 33411 US

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.

SIGNATURE:

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVT () Delete Title: DVT (X) Change () Addition

 Name:
 MULLER, BERND F
 Name:
 MULLER, BERND F

 Address:
 10257 FANFARE DR.
 Address:
 10345 SW84TH AVE RD

 City-St-Zip:
 BOCA RATON, FL 33428
 City-St-Zip:
 OCALA, FL 34481

Title: PS () Delete Title: PS (X) Change () Addition

 Name:
 KULINS, MIKE R
 Name:
 KULINS, MIKE R

 Address:
 7611 NW HWY. 320
 Address:
 2528 N MAGNOLIA AVE

 City-St-Zip:
 MICANOPY, FL 32667
 City-St-Zip:
 OCALA, FL 34475

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MIKE KULINS MK 10/05/2004