

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000108617

FILED
Jan 18, 2004
Secretary of State

Entity Name: CUSTOM CYCLE CARRIER CORPORATION

Current Principal Place of Business:

1065 N.W. 50TH DRIVE
POMPANO BEACH, FL 33064

New Principal Place of Business:

1919 NW 21ST STREET
BUILDING #3
POMPANO BEACH, FL 33069

Current Mailing Address:

1065 N.W. 50TH DRIVE
POMPANO BEACH, FL 33064

New Mailing Address:

P.O.BOX 4217
DEERFIELD BEACH, FL 33442

FEI Number: 65-1153588

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNS, EMMETT L
1065 N.W. 50TH DRIVE
POMPANO BEACH, FL 33064

Name and Address of New Registered Agent:

BURNS, EMMETT L
P.O.BOX 4217
DEERFIELD BEACH, FL 33442

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: _____

01/18/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: BURNS, EMMETT L
Address: 1065 N.W. 50TH DRIVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: VP () Delete
Name: TREVEHA, DIANE K
Address: 1065 N.W. 50TH DRIVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: SIX, DON
Address: 308 SE 2ND STREET
City-St-Zip: DEERFIELD BEACH, FL 33441

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: DON SIX

VP

01/18/2004

Electronic Signature of Signing Officer or Director

Date