2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 23, 2006 08:00 AN Secretary of State

DOCUI 1. Entity Nam NELSON	CYCLE OF SOUTH FL. CORP.		Secretary of State
Principal Plac 8034 W 21 (HIALEAH, FL			- (MATCHER) (III BACC) ALGO BENIL BACCO BENIL BACCO
DO NOT WRITE IN THIS SPACE			01172006 No Chg-P CR2E034 (11/05)
			4. FEI Number Applied For 20-0868432 Not Applicable 5. Certificate of Status Desired Service Required Fee Required
	6. Name and Address of Current Registered Agent	I	free contract to the second of
6731 PAR	IORACIO N K ST DOD, FL 33024	To the state of th	DO NOT WRITE IN THIS SPACE
		10. a . a . a a a a a a.	The state of the s
8. The above	e named entity submits this statement for the purpose of changing its register		red agent, or both, in the State of Florida. I am familiar with, and accept
the obligations of registered agent. SIGNATURE Signature, topologish tour remis of registered agent and title if applicable. (NOTE: Registered Agent signature required when renstating) DATE			
FILE NOW!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees			
10.	OFFICERS AND DIRECTORS		
NAME STREET ADDRESS CITY-ST-ZIP	DPST BAKER, HORACIO N 6731 PARK ST HOLLYWOOD, FL 33024		000000396199 01/27/06-80022-023 150.00
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TITLE NAME STREET ADDRESS GITY-ST-ZIP			
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 it 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.			
SIGNATURE SUCNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 1/2 Day UNITED NAME OF SIGNING OFFICER OR DIRECTOR 1/2 Day UNITED NAME OF SIGNING OFFICER OR DIRECTOR 1/2 Day UNITED NAME OF SIGNING OFFICER OR DIRECTOR 1/2 Day UNITED NAME OF SIGNING OFFICER OR DIRECTOR 1/2 Day UNITED NAME OF SIGNING OFFICER OR DIRECTOR 1/2 Day UNITED NAME OF SIGNING OFFICER OR DIRECTOR 1/2 Day UNITED NAME OF SIGNING OFFICER OR DIRECTOR 1/2 Day UNITED NAME OF SIGNING OFFICER OR DIRECTOR 1/2 Day UNITED NAME OF SIGNING OFFICER OR DIRECTOR 1/2 DAY UNITED NAME OF SIGNING			