## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000057779 (9)

VIP BIKES, INC.

Principal Place of Business Mailing Address 4704 61ST AVENUE TERR W 4704 61ST AVENUE TERR W BRADENTON FL 34210 **BRADENTON FL 34210-4034** 3. Date Incorporated or Qualified 3a. Date of Last Report 08/13/1993 01/30/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0427399 21 26 Not Applicable Suite, Apt #, etc Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees 23 Zφ Country 2mCountry 8. This corporation has liability for intergible tax under s. 199.032, Yes 🔲 No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MORTON, PETER 4704 61ST AVENUE TERR W 82 Street Address (P.O. Box Number is Not Acceptable) **BRADENTON FL 34210** 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, 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. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Stgnarure, typical or printed name of registerior agent and title if applicables. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) DELETE TITLE 1.1 TITLE Change Addition MORTON, PETER NAME 1.2 NAME 4704 61ST AVE TERR W STREET ADDRESS 1.3 STREET ADDRESS **BRADENTON FL 34210** CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE ☐ Change Addition 2.1 TITLE TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHY-S\*-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 City-St-7IP CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 62 NAME

> 6 3 STREET AODRESS 6 4 CITY-ST-ZIP

I do 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 607, Florida Statutes; and that my same

SIGNATURE:

STREET ADDRESS

CITY-ST- NP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

3/97 755-8693 te Dayrina Phone

FILED

Jan 17 1997 8:00am

Secretary of State