

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000083731

FILED
Apr 16, 2004
Secretary of State

Entity Name: TOP CYCLE PALM BEACH INC.

Current Principal Place of Business:

113 N. COUNTY RD.
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

113 N. COUNTY RD.
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 65-0463965

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POUPART, PATRICK M
3705 S. FLAGLER DR. APT 10
WEST PALM BEACH, FL 33405 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: POUPART, PATRICK M.
Address: 3705 S FLAGLER DR APT 10
City-St-Zip: WEST PALM BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POUPART, PATRICK M.
Address: 122 MORNING DEW CIRCLE
City-St-Zip: JUPITER, FL 33458 US

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: PATRICK M POUPART

PRES

04/16/2004

Electronic Signature of Signing Officer or Director

Date