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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCLIMENT

RALEIG	H BICYCLES OF JUPITER,	• •)						
							32:12 11		
201 U.S. HWY UNIT B-1		201 U.S. HWY. ONE UNIT B-1			DO NOT WE	UTE INI TUIC	SDVCE		
JUPITER FL 33477-5018 JUPITER FL 33477-5018						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
2. Principal Place of Business 2a, Mailing Address						03/28/1994 4. FEI Number		1 1/	Applied For
1		26			65-0496654			ot Applicable	
Sulte, Apt. #, etc. Suite, Apt. #,						*			Additional
27						5. Certificate of Status Desired			Required
City & State	9	City & State				Election Campaign Financing Trust Fund Contribution	· []		May Be
Zip	Country	7ip	Cour	ntry		This corporation owes or has		<u>-</u>	
4	25	29	30	-		Personal Property Tax due J	-		□ No
	9. Name and Address of Curre		1221			10. Name and Address of New		Agent	<u> </u>
RR	OWN, GUIA E.P.			81	Name				
725 NORTH A1A				82	Stroot Ado	Iress (P.O. Box Number is Not Accep	atable)		
SUITE A-108				اء"	Sileet Auu	iress (F.O. BOX NOTIDAL IS NOT ACCA	otatole)		
TEQUESTA FL 33477				83					
			Į,	84	City		FL	85 Zip	Code
SIGNATURE	Signature, typed or printed name of registered ag					lian's board of directors. I hereby action is board of directors. I hereby action is board of directors.	DATE		
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTO	RS IN 12
TITLE	D	DEL ETE	1.1 TITL	LE	-			Change	Addition
NAME	TOMC, JAMES		1.2 NA	ME					
STREET ADDRESS	3486 HARBOR RD. N.		1.3 STA	REET A	ADDRESS				
CITY-ST-ZIP				Y-ST	T-ZIP				
TITLE		☐ DELETE	2.1 3111	LE				☐ Change	☐ Addition
NAME			2.2 NA1	ME					
STREET ADDRESS			2.3 STR	IEET.	ADDRESS				
CITY-ST-ZIP			2 4 CIT		ST - ZIP				
TITLE		☐ DELETE	3.1 TITE					L_] Change	Addition
NAME			3.2 NA						
STREET ADDRESS					ADDRESS				
CITY-\$1-ZIP		FT per fee	3.4. CIT	_	T-ZIP			[] o	
TITLE		☐ DELETE	4.1 1(1)					Change	Addition
NAME			4. 2 NA						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	*	DELETE	4.4 C(T)		i - ZiP			Change	Addition
		Metal F	5.1 TITL					∪nange	MODITION
AVANCE A CONTRACTOR			5 2 NAN						
STREET ADDRESS			5 3 STA	IEET /	ADDRESS				

CITY-ST-ZIP 14. Thereby 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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an arterys.

6.1 TITLE

6.2 NAME 6.3 STREFT ADDRESS

DELETE

SIGNATURE:

CITY-ST-ZIP

TITLE

NAME

Addition

FILED

Feb 03 1998 8:00am

Secretary of State