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FILED

Apr 14 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000033741 (7)

1. Corporation Name  
BIKERS AMERICA, INC.



Principal Place of Business

18709 GULF BLVD  
INDIAN SHORES FL 34635

Mailing Address

18709 GULF BLVD  
INDIAN SHORES FL 34635

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 15023 GULF BLVD

Suite, Apt. #, etc.

22 \*

City & State

23 MADEIRA BEACH, FL

Zip

24 33708

Country

25 PINELLAS

2a. Mailing Address

26 15023 GULF BLVD

Suite, Apt. #, etc.

27 \*

City & State

28 MADEIRA BEACH, FL

Zip

29 33708

Country

30 PINELLAS

3. Date Incorporated or Qualified

05/02/1994

4. FEI Number

59-3240810

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ROMAN, MICHAEL T

18709 GULF BLVD. 15023 GULF BLVD  
INDIAN SHORES FL 34635 MADEIRA BEACH, FL  
33708

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee, if applicable

(NOTE: Registered Agent's signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME ROMAN, MICHAEL T

STREET ADDRESS 13425 SAN RAFAEL DR

CITY-ST-ZIP LARGO FL 34644 33774

TITLE STD ☐ DELETE

NAME ROMAN, CAROL ANN

STREET ADDRESS 13425 SAN RAFAEL DR

CITY-ST-ZIP LARGO FL 34644 33774

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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

SIGNATURE Carol Ann Roman Carol Ann Roman 4/13/98 813 397-1441

CR2E034 (10/97)