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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 21 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000019936 (0)

BEACH BICYCLE WORKS, INC.

Principal Place of Business Mailing Address								
117 FIFTH AVE INDIALANTIC FI US	NUE	Mailing Address 80 MOHICAN WAY MELBOURNE BEACH						
					3. Date Incorporated or Qualifie 03/09/1995		o of Last R 3/1996	eporl
2. Principal P	lace of Business	2a, Mailing Addres	s		4. FEI Number 59-3301783		<b></b>	plied For t Applicable
Suite, Apt. #, etc.		Suite, Apt #, et	Suite, Apt #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State	h		Election Campaign Financing     Trust Fund Contribution	9 \$5.00 May Be Added to Fees		
Zip 24	Country   Z <sub>1</sub> p     <b>25</b>   <b>29</b>		Countr 30	У	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New	Registered A	gent	
COH	IEN, RICHARD H		81	Name				
80 N	IOHICAN WAY BOURNE BEACH FL 32951		82 Stree		ddress (P.O. Box Number is Not Acceptable)			
			8:					
			84	'		FL	85 Zip (	
office or r agent. I a	to the provisions of Sections 607 egistered agent, or both, in the S im familiar with, and accept the of	.0502 and 607.1508, Florida itate of Florida Such change bligations of, Section 607.05	Statules, the above was authorized b 05, Florida Statuto	re-named corp by the corporal es.	poration submits this statement for the tion's board of directors. I hereby ac-	epurpose of control	hanging it ntment as	s registered registered
SIGNATURE	Signature, typed or printed name of registere	d ageni and title if applicable	(NO1E: Rogistered A	gent signature requi		DATE		
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICERS AND I	DIRECTOR	IS IN 12
TITLE	D	☐ DFLE	TE 1.1 TIPLE				Change	Addition
NAME	COHEN, WILMA		1.2 NAME					
STREET ADDRESS	88 MOHICAN WAY		1.3 \$1RE	1 ADDRESS				
CITY-ST-ZIP	MELBOURNE BEACH FL 32	951	1,4 CITY -	ST-ZIP				
TITLE	D	☐ DELE	TE 2.1 TITLE				Change	Addition
NAME	COHEN, RICHARD H		2.2 NAME					
STREET ADDRESS	80 MOHICAN WAY	,	2.3 STREE	I ADDRESS				
CITY-ST-ZIP	MELBOURNE BEACH FL 32		2. 4 CITY	ST-ZIP				
TITLE		□ DETE	TE 31 TITLE				Change	Addition
NAME			3.2 NAME					
STREET ADDRESS			3 3 STREE	T ADDRESS				
CITY-ST-ZIP		~·	3.4. CITY	·S1 - ZIP		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
TITLE		L DELF	TE 4.1 TITLE			Ļ	Change	Addition
NAME			4. 2 NAM					
STREET ADDRESS			4.3 STREE	1 ADDRESS				
CITY-ST-ZIP			4.4 CITY	ST-ZIP				
TITLE		☐ DELE	TE 5.1 TITLE			[	Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			53 STREE	I ADDRESS				
CITY-ST-ZIP			5.4 C/TY-	ST - ZiP				
TITLE		☐ DELE	TE 6.1 TALE				Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	1 ADDRESS				
CITY_ST_7IP	1		eacity.	£1. 7IP			1,	1

14. 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 eath, 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 chapted, or on an attact nicely with an address.

1/24/97

(407) 768-8541