FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

P95000079146 (3)

ROTT CYCLES, INC.

Principal Place of Business	Mailing Address	
1935 NE 4TH AVENUE FT LAUDERDALE FL 33305	1935 NE 4TH AVENUE FT LAUDERDALE FL 33305	



			FT LAUDERDALE FL 33305		
				3. Date Incorporated or Qualified 10/16/1995	3a. Date of Last Report
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 255/	Hollywood.	13/ Va 26 2231 HOM	Lund Bli	1 65-0636821	Not Applicable
22		Suite, Apt #, etc.	/	5. Certificate of Status Desired	\$8.75 Additional Fee Required
Orty & State 23 //0//1	wood Fl.	City & State 28 /6/// 01000	1 F1.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Σφ / - 222	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 100 022
24 230	20 25 4.5.07	- 29 33000	30 451	Florida Statutes Yes	□No
	9. Name and Address of C	urrent Registered Agent		10. Name and Address of New Re	gistered Agent
1935 N	rdson, gex f IE 4th avenue Iderdale fl 33305		82 Street Add 223/	dress (P.O. Box Number is Not Acceptable #0//wood B/va	lua
11 Dire cont t	the week of College	0.000	84 City	Murood	FL 85 Zip Code
or registere familiar wit	o the provisions of Sections 607 and agent, or both, in the State of h, and accept the obligations of,	.0502 and 607.1508, Florida Statute. Florida: Such change was authorize Section,607.0505, Florida Statutes.	s, the above-named corporation's boo	pration submits this statement for the purp and of directors. I hereby accept the appoi	ose of changing its registered office ntment as registered agent. I am
SIGNATURE		agest and the frapplication Sus	20 Fleet W Registered Agent signature requir	od Silva	22.96
. 12.	OFFICER	S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
THILE		☐ DELETE	1. 1 TUTLE	res	Change Addition
NAME CHINES ARE IN CO.			1.2 NAME	res. Jusan Freelwood S 1945 N. Southlake	lua
STREET ADDRESS			13 STREET ADDRESS	045 N. Southlake	Or.
CHY-ST-ZIF TITLE		E Deserv	14 CITY-SI-ZIP	15/14wood, 1-1., 33	019
NAME		☐ DELETE		,	Change Addition
STREET AUDRESS			2 2 NAME		
SITY - ST - ZIP			2.3 STREET ADDRESS		
THLE		☐ DELETE	24 CITY-ST-ZIP 3 1 TIFLE		
NAME		peccit	3.2 NAME		☐ Change ☐ Addition
STREET ADDRESS			3.3 STREET ADDRESS		
C-TY ST-7/P			34 CrTY-ST-ZIP		
THE		DELFIE	4 1 TIFLE		Change Addition
NAME			4.2 NAME		☐ Change ☐ Addition
STREET ADDRESS			4.3 STREET ADDRESS		
CHY SI ZIF			4 4 CITY-ST-ZIP		Í
T ILF		DELETE	5 1 TiTLE		Change Addition
NAME			5.2 NAME		The second of the second
STREET ADDRESS			5 3 STREET ADDRESS		
CITY - ST- ZIP			5.4 CITY - ST - ZIP		
1.11.5		☐ DELETE	6 1 TIFLE		☐ Change ☐ Addition
NAME			62 NAME		_ , _ ,
STUCKL ADDRESSE			6.3 STREET ADDRESS		
STREET ADORESS City+St+2ip					

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

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-31-96 Date 954- 922-3658 Dadute Proce #