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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

P95000084857 (8)

VERO BEACH CYCLING AND FITNESS INC.

Principal Place of Business	

Mailing Address

1865 14TH AVENUE

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME

1865 14TH AVENUE



4-26.96 407.746.7506

of Sections 607.0500, in the State of Florio obligations of, Sect	ction 607.0505, Florida Statutes	Country 30	Name Street Add City named corpo	3. Date Incorporated or Qualified 11/02/1995 4. FEI Number 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for in Florida Statutes 10. Name and Address of New Redress (P.O. Box Number is Not Acceptable or Status Stat	S\$5 Acontangible tax unde	Applied For Not Applicable 75 Additional ee Required 6.00 May Be dded to Fees or's 199.032, Zip Code
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026		13 STREET	ADDRESS			
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		DELETE ormation supplied with this filing is voluntarily furn cated on this annual report or supplemental ann sector of the corporation or the receiver or furste	5 2 NAME 5 3 STREET 5 4 CITY-S DELETE 6 1 TITLE 6 2 NAME 6 3 STREET 6.4 CITY-S ormation supplied with this filing is voluntarily furnished and doe cated on this annual report is to	5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP DELETE 6 1 TITLE 6 2 NAME 6 3 STREET ADDRESS 6 4 CITY - ST - ZIP Formation supplied with this filing is voluntarily furnished and does not qualify cated on this annual report or supplierental annual report is true and accurractor of the corporation or the receiver or trustee empowered to execute the	52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 6 1 TITLE 62 NAME 63 STREET ADDRESS 6.4 CITY-ST-ZIP Formation supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.0 cated on this annual report or supplemental annual report is true and accurate and that my signature shall have the sector of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Fig. 3 if changed, or on an attachment with an address.	52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP 6 1 TITLE 62 NAME 63 STREET ADDRESS 64 CITY - ST - ZIP Commation supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Stated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as section of the corporation or the receiver or trustee empowered to execute this report as required by Chapiter 607. Florida Statutes: