2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9600001841 1. Entity Name BIKESMYTH, INC.							Feb 06, 2002 8:00 am Secretary of State 02-06-2002 90018 015 ***150.00				
1743 S EIGH A	ce of Busines T STREET BEACH FL 32		Mailing Address 1743 S EIGHT STREET A FERNANDINA BEACH FL 32034				1 1 30/183 0 (FR 1811) 8 11/1 0 0/1/1 3 0/1/1	aa nii aa nii aa ni		14 08 1 40 40 1	
2. Principal	Place of Busin	ness	3. Mailing Address								
Suite, Apt	t. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State			City & State			4.	4. FE! Number 59-3356188 Applied For				
Zip	Zip Country		Zip	ntry	5. Certificate of Status Desired S8.75 Additional Fee Required						
6. Name and Address of Current F			egistered Agent	7. Name and Address of New Registered Agent							
					Name			, <u>.</u>			
PALMER, 2408-A 19	J. PATRICK St ave			Street Address (P.O. Box Number is Not Acceptable)							
	DINA BEACH	I FL 32034					-				
					City		FL Zip Code			э	
Tax filing	Signature, typed	or printed name of registered agent en ible to satisfy its Intangible and elects to do so.		'!!! FEE 002 Fee	•)	10. Election Campaign Finar Trust Fund Contribution.	DATE Icing		0 May Be to Fees	
11.		OFFICERS AND D		12.	•		L DITIONS/CHANGES TO OFFIC	ERS AND D	RECTORS	EIN 11	
TITLE." NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITL NAM STRE	i i				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IANET S EST AVENUE BEACH FL 32266	☐ Delete] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD PALMER, J 2408-A 1S FERNANDI		` ☐ Delete			••	-	·]^Change	☐ Addition	
TITLE NAME STREET ADDRESS SITY-ST-ZIP	VTD PALMER, S 2408-B 1S FERNANDII		☐ Delete] Change	☐ Addition	
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ITLE IAME ITREET ADDRESS ITY-ST-ZIP			Delete		ľ .			С] Change	Addition	
of the cor	on this report poration or the or on an atta	t or supplemental report is tr	ue and accurate and that i ered to execute this report	my signat t as requii	ture shall have th	e same li	19.07(3)(i), Florida Statutes. I fuegal effect as if made under oat da Statutes; and that my name a	n; that I am a ppears in B	an officer ock 11 or	or director	

SIGNATURE:

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-15-02 (904) 321-2603 Date Daytime Phone #