


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

FILED
Jul 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000064882 (9)

1. Corporation Name

REVOLUTION BICYCLES, INC.

Principal Place of Business

6331 4TH STREET NORTH
ST. PETERSBURG FL 33702

Mailing Address

6331 4TH STREET NORTH
ST. PETERSBURG FL 33702-7511



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 6331 4TH STREET N.		26 6331 4TH ST. N.		08/02/1996		8/2/1996	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number		Applied For	
23 ST. PETERSBURG		28 ST. PETERSBURG		59-3391889		Not Applicable	
24 33702		25 U.S.		5. Certificate of Status Desired		8.75 Additional Fee Required	
29 33702		30 U.S.		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
29 33702		30 U.S.		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		Yes No	

9. Name and Address of Current Registered Agent

ADDLER, WILLIAM G
6490-E CAPE HATTERAS WAY NE
ST. PETERSBURG FL 33702

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	0 ADDLER, WILLIAM G	1.1 TITLE	Change Addition
NAME	6490-3 CAPE HATTERAS WAY N.E.	1.2 NAME	
STREET ADDRESS	ST. PETERSBURG FL 33702	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Change Addition
TITLE	0 ADDLER, CATHERINE H	2.1 TITLE	Change Addition
NAME	6490-3 CAPE HATTERAS WAY N.E.	2.2 NAME	
STREET ADDRESS	ST. PETERSBURG FL 33702	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Change Addition
TITLE		3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Change Addition
TITLE		4.1 TITLE	Change Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Change Addition
TITLE		5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Change Addition
TITLE		6.1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Change Addition

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 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:

WILLIAM ADDLER

WILLIAM ADDLER

7/7/97

813-522-5510

CR2E034 (9/96)