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

FILED
Jun 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # **P97000086080 (3)**

1. Corporation Name
DAYTONA TRIKE, INC.

Principal Place of Business	Mailing Address
1299 STATE ST., WAREHOUSE C HOLLY HILL FL 32117	1299 STATE ST., WAREHOUSE C HOLLY HILL FL 32117

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/06/1997
4. FEI Number: 593474968 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt #, etc 22	Suite, Apt #, etc. 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

9. Name and Address of Current Registered Agent

NAVARRA, WILLIAM
1615 RIDGEWOOD AVE.
HOLLY HILL FL 32117

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 ______ (NOTE: Registered Agent signature required when reinstating) DATE ______

12. OFFICERS AND DIRECTORS

TITLE	President	☐ DELETE
NAME	Michael H. Harrison	
STREET ADDRESS	1642 Ridge AVE	
CITY-ST-ZIP	Holly Hill Fl 32117	
TITLE	Vice-President	☐ DELETE
NAME	William L Geertsen	
STREET ADDRESS	1647 Ridge AVE	
CITY-ST-ZIP	Holly Hill Fl 32117	
TITLE	Secretary	☐ DELETE
NAME	Eleanor J. Geertsen	
STREET ADDRESS	1647 Ridge AVE	
CITY-ST-ZIP	Holly Hill Fl 32117	
TITLE	Treasurer	☐ DELETE
NAME	Irene R. Harrison	
STREET ADDRESS	1643 Ridge Ave	
CITY-ST-ZIP	Holly Hill Fl 32117	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME	S98162900015	
5.3 STREET ADDRESS	-06/11/98--01007--015	
5.4 CITY-ST-ZIP	***150.00	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (10/97)

14. I 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: Michael Harrison > Michael H Harrison President 4-28-98 904-677-786