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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000098973 (5)

WESTWINDS CYCLES, INC.

Principal Place of Business Mailing Address 2801 ALTERNATE 19 2801 ALTERNATE 19 **DUNEDIN FL 34898** DUNEDIN FL 34698

FILED

Jun 01 1998 8:00am

Secretary of State

				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				11/20/1997	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26	,···	59-348274	
Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
23	Country	28	Country		Added to Fees
Zip	Country	Zip		8. This corporation owes or has paid the	e current year Intangible
24	25 9. Name and Address of Curre	nt Registered Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Registe	
ALI		it togistored Agent	81 Name		/
AND HAMPIER AUTHUR TO THE FRANK W WEBSTA					
			82 Street Add	dress (P.O. Box Number is Not Acceptable)	ach Blud
CORAL GABLES FL 33134 JGOS GULF Beach Blud					
_					
			B4 City		Zip Code
44 Duraugnt I	o the provisions of Sections 607 050	22 and 607 1609. Florida	Statutes the above-named cou	rporation submits this statement for the purpo	se of changing its registered
office or re	egistered agent, or both, in the State	of Florida. Sugh change	was authorized by the corpora	ation's board of directors. I hereby accept the	appointment as registered
agent. Lar	n familiar with, and accept the oblic	gations of Scotion 607.050	5, Florida Statutes.	1/	1/00
SIGNATURE.	Specifie, typed or printed name of registered sig	ent and title if amplicable	(NOTE: Registered Agent signature requ	Hirard where coinstalings)	30/79
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	PD	DELET	E 1.1 TITLE		Change Addition
NAME	PERON, VICKI		1.2 NAME		
STREET ADDRESS	2801 ALTERNATE 19		1.3 STREET ADDRESS		
CITY-ST-ZIP	DUNEDIN FL 34698		1.4 CITY-ST-ZIP		
TITLE	VSTD	☐ DELET			Change Addition
NAME	PERON, VICKI		2.2 NAME		
STREET ADDRESS	2801 ALTERNATE 19		2.3 STREET ADDRESS		
CITY-ST-ZIP	DUNEDIN FL 34698		2. 4 CITY-ST-ZIP		
TITLE		DELET	E 31 TITLE		Change
NAME			3.2 NAME	•	
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELET	E 4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-\$T-ZIP			4.4 C(TY - ST - ZIP		
TITLE		☐ DELET			Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
City-St-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELET			Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-7IP			6.4 CITY - ST - ZIP		

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.