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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

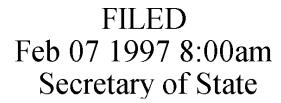
## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # S89346

(8)

INTERNATIONAL BICYCLE SHOP AND FITNESS CENTER WE ST. INC.





Principal Place	of Business	Mailing Address	Mailing Address								
4481 N. UNIVERSITY DRIVE LAUDERHILL FL 33351		11708 MW 38TH PLACE C/O LEON WEISS SUNRISE FL 33323-2689									
		US							te of Last Report 13/1996		
2. Principal Pla	ace of Business	2a. Mailing Address				4. 1	El Number	<del></del>		App	olied For
21		26					65-0293263			Not	Applicable
Suite, Apt. #	#, etc.	Suite Apt. #, etc.	Suite Apt. #, etc.			5. (	Certificate of Status Desired			<b>75</b> A	dditional quired
City & State	!	City & State				6. E	lection Campaign Financing		\$5	.00	Viay Be
23		28				1	rust Fund Contribution				Fees
Zιp	Country Zip		Cou	Country			This corporation has liability f	or intangi	ible tax un	der s.	199.032
24	25 29 30		30	]			Florida Statutes	Yes	☐ No		
	9. Name and Address of Curren	t Registered Agent		Ĺ.,		10.	Name and Address of New	Register	ed Agent		
TOLA	AND, BRUCE JAY			81	Name						
800	BRICKELL AVE			82	Street 4	Address (P.	D. Box Number is Not Accep	table)	····		
SUIT	E 1100				O. 001 F	, aurous (r.,	טייטיין ואון פין ייטיייטיין וויטין איטייטיין	/			
MIAN	Al FL 33351			83							
								<del></del>	12-1	7:- 0	
				84	City			F	L 85	Zip C	oae
11. Pursuant to	o the provisions of Sections 607.050	2 and 607,1508, Florida Statu	ites, the at	pove	-named	corporation	submits this statement for th	a purpos	e of chang	ing its	registered
office or re	egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida, Such change was	authorize	d by	the corp	poration's bo	ard of directors. I hereby ac	cept the a	appointme	nt as r	egistered
5	n familiar with, and accept the obliga	ations of, Section 607.0505, F	iorida Stat	tutes							
SIGNATURE ;	Signature, typed or printed name of registered age	ior and tale if applicable (NC	ITE Banistere	d Ane	n) signature	required when r	eineteting)	DAT	F		
12.	OFFICERS AN		13.	a rigo	ik bigita.ore		DDITIONS/CHANGES TO OF			CTORS	IN 12
TITLE	PS	DELETE	1,1 11	ITLE		PT			Cha		Addition
NAME	MORITZ, WAYNE	<del></del>	1,2 N		)	' '	•		_	•	_
STREET ADDRESS	11708 NW 38TH PL				ADDRESS						
	SUNRISE FL										
CITY - ST - ZIP TITLE	VT	DELETE	2,1 (1	ITY-S	1 - ZIP	15			☐ Cha	anne	☐ Addition
	MORITZ, ESTELLE					• •			L., 0	ango	Addition
NAME	11708 NW 38TH PL		2,2 N/								
STREET ADDRESS	SUNRISE FL		1		address	\ 					
CITY - ST - ZIP		LIbritte			T-21P						That Pro-
TITLE	VD	DELETE	3,1 11						Cha	ange	Addition
NAME	WEISS, LEON		3.2 N								
STREET ADDRESS	11708 NW 38TH PL		3.3 \$1	TREET	ADDRESS						
CITY-ST-ZIF	SUNRISE FL			DITY - S	T-ZIP	<u> </u>					
TITLE	VD	DELETE	4,1 TI	ITLE		1			Chi	ange	☐ Addition
NAME	MORITZ, MATTHEW		4 2 N	NAME							
STREET ADDRESS	11708 NW 38TH PLACE		4.3 ST	TREET	ADDRESS						
CHY-S1-Z-P	SUNRISE FL		4.4 CI	ITY-S	F-ZIP						
TITLE	VP	DELETE	51 TI	TLE					Cha	ange	Addition
NAME	WEISS, MOLLIE		5.2 N	AME							
STREET ADDRESS	11708 NW 38 PLACE		5.3 S	TREET	ADDRESS						
C(1Y-S1-2IP	SUNRISE FL		5.4 CI	ITY-S	T- 21P						
TITLE		DELETE	6.1 Ti			<del>                                     </del>			☐ Cha	ange	Addition
NAME			6,2 N							•	
STPEET ADDRESS					ADDRESS						
CITY-SE-ZIP				ITY-S							
DD1:52:78			■ n4 b	art - Or	17 LIF	,					

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: