


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 29, 2005 08:00 AM
Secretary of State

DOCUMENT # F04000002545 1. Entity Name CYCLE GEAR, INC.	
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Principal Place of Business 4705 INDUSTRIAL WAY BENICIA, CA 94510	Mailing Address 4705 INDUSTRIAL WAY BENICIA, CA 94510
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DO NOT WRITE IN THIS SPACE



06302005 No Chg-P CR2E034 (10/03)

4. FEI Number 94-2464782	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	DO NOT WRITE IN THIS SPACE
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PCD BERTRAM, DAVID 2110 TWIN SISTERS ROAD SUISUN, CA 94585	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VST DESSARDINS, HENRY 4621 GOLDCREST WAY ANTIOCH, CA 94509	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D NANDOR, BILL 2698 GAPWELL COURT PLEASANTON, CA 94566	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D OPPENHEIMER, RICHAR 2475 FILBERT STREET SAN FRANCISCO, CA 94123	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		

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08/29/05-R00005-002 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	6/20/05 <small>Date</small>	707-747-5052 <small>Daytime Phone #</small>
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