

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002545

FILED  
Jan 21, 2008  
Secretary of State

Entity Name: CYCLE GEAR, INC.

## Current Principal Place of Business:

4705 INDUSTRIAL WAY  
BENICIA, CA 94510

## New Principal Place of Business:

## Current Mailing Address:

4705 INDUSTRIAL WAY  
BENICIA, CA 94510

## New Mailing Address:

FEI Number: 94-2464782

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PCD ( ) Delete  
Name: BERTRAM, DAVID  
Address: 2110 TWIN SISTERS ROAD  
City-St-Zip: SUISUN, CA 94585

Title: VST ( ) Delete  
Name: DESJARDINS, HENRY  
Address: 367 DANTE CT  
City-St-Zip: BRENTWOOD, CA 94513

Title: D ( ) Delete  
Name: NANDOR, BILL  
Address: 2698 GAPWELL COURT  
City-St-Zip: PLEASANTON, CA 94566

Title: D ( ) Delete  
Name: OPPENHEIMER, RICHA  
Address: 2475 FILBERT STREET  
City-St-Zip: SAN FRANCISCO, CA 94123

Title: CFO (X) Delete  
Name: WEHLITZ, GEORGE JR  
Address: 527 S MORNINGSTAR DR  
City-St-Zip: ANAHEIM HILLS, CA 92808

Title: D ( ) Delete  
Name: PIAZZA, JOE  
Address: 158 SANGUINATTI CT  
City-St-Zip: COPPERAPOLIS, CA 95228

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STUART SHICOFF

Electronic Signature of Signing Officer or Director

CONT

01/21/2008

Date