

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000000593

Entity Name: PRO CYCLE TECH , LLC

FILED
Jul 16, 2007
Secretary of State

Current Principal Place of Business:

3230 S.E. DOMINICA TERRACE
SUITE # 1
STUART, FL 34997 US

New Principal Place of Business:

Current Mailing Address:

3230 S.E. DOMINICA TERRACE
SUITE # 1
STUART, FL 34997 US

New Mailing Address:

FEI Number: 20-8918685 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

AVILES, PETER
2447 SE MONROE ST
STUART, FL 34997 US

Name and Address of New Registered Agent:

AVILES, PETER
141 BANYAN DR.
PORT ST. LUCIE, FL 34997 US

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: _____

07/16/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: AVILES, PETER
Address: 2447 S.E. MONROE ST
City-St-Zip: STUART, FL 34997 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: AVILES, PETER
Address: 141 BANYAN DR.
City-St-Zip: PORT ST. LUCIE, FL 34997 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PETER AVILES

MGR

07/16/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date