

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000020082

FILED  
Feb 06, 2012  
Secretary of State

**Entity Name:** CENTRAL FLORIDA CYCLE PARTS, LLC

**Current Principal Place of Business:**

5449 BENCHMARK LN  
BAY #109  
SANFORD, FL 32773

**New Principal Place of Business:**

5449 BENCHMARK LN  
STE #109  
SANFORD, FL 32773

**Current Mailing Address:**

9961 ALOMA BEND LANE  
OVIEDO, FL 32765

**New Mailing Address:**

5449 BENCHMARK LN  
STE #109  
SANFORD, FL 32773

**FEI Number:** 27-3650863

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SABIR, ARIF  
9961 ALOMA BEND LANE  
OVIEDO, FL 32765 US

**Name and Address of New Registered Agent:**

SABIR, ARIF A  
1900 JAKE ST  
APT 213  
ORLANDO, FL 32814 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: ARIF SABIR

02/06/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SABIR, ARIF  
Address: 1900 JAKE ST APT# 213  
City-St-Zip: ORLANDO, FL 32814

I hereby 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: ARIF SABIR

MR

02/06/2012

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