

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90085 014 ***150.00

DOCUMENT # P01000011451

1. Entity Name

CUSTOM SPORTBIKE CONCEPTS, INC.



Principal Place of Business

1019 W COLONIAL DR
ORLANDO FL 32804

Mailing Address

1019 W COLONIAL DR
ORLANDO FL 32804

2. Principal Place of Business

184 S. DILLARD ST.

Suite, Apt. #, etc.

3. Mailing Address

184 S. DILLARD ST.

Suite, Apt. #, etc.

City & State

WINTER GARDEN, FL

City & State

WINTER GARDEN, FL

Zip

34787

Country

U.S.A

Zip

34787

Country

U.S.A

4. FEI Number

59-3695305

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/05)

6. Name and Address of Current Registered Agent

ANGLADA, STEPHANE N
711 REGINA CIRCLE
OAKLAND FL 34787

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent, and title if applicable.

STEPHANE N. ANGLADA PRESIDENT. 2-14-06

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME ANGLADA, STEPHANE N
STREET ADDRESS 711 REGINA CIRCLE
CITY-ST-ZIP OAKLAND FL 34787

TITLE V ☐ Delete
NAME ANGLADA, BRENDA
STREET ADDRESS 711 REGINA CIRCLE
CITY-ST-ZIP OAKLAND FL 34787

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 life empowered.

SIGNATURE:

STEPHANE N. ANGLADA 2/14/06 407-654-5711