## 2008 FOR PROFIT CORPORATION

## FILED ANNUAL REPORT Mar 19, 2008 08:00 A Secretary of State DOCUMENT # P03000128876 ROUND 2 MOTORCYCLES, INC. Principal Place of Business Mailing Address 5380 N. COCOA BLVD 5380 N. COCOA BLVD COCOA, FL 32927 COCOA, FL 32927 01152008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEt Number Applied For 51-0487656 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROYLE, SCOTT DO NOT WRITE 2720 MARSHALL CT. COCOA, FL 32926 IN THIS SPACE 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. (NOTE: Registered Agent signature required when reinstating) 1 .3 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees , After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE ROYLE SCOTT 1929 N.COCOA BLVD. NAME STREET ADDRESS COCOA, FL 32922 CITY-ST-ZIP 000000864248 04/04/08-80006-013 150.00 TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP HILE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY+ST+Z(P

NG OFFICER OR DIRECTOR