

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000135766

FILED
Apr 16, 2009
Secretary of State

Entity Name: CYCLE ONE MOTORSPORTS, CORP.

Current Principal Place of Business:

37 N. ORANGE BLOSSOM TRAIL
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

37 N. ORANGE BLOSSOM TRAIL
ORLANDO, FL 32805

New Mailing Address:

FEI Number: 20-0481618 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOUZADA, ERNESTO
2842 PONKAN PINES DR.
APOPKA, FL 32712 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: D () Delete
Name: LOUZADA, ERNESTO
Address: 2842 PONKAN PINES DR
City-St-Zip: APOPKA, FL 32712

Title: D () Delete
Name: LOUZADA, CECILIA
Address: 2842 PONKAN PINES DR.
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LOUZADA, ERNESTO
Address: 2842 PONKAN PINES DR
City-St-Zip: APOPKA, FL 32712

Title: VP (X) Change () Addition
Name: LOUZADA, CECILIA
Address: 2842 PONKAN PINES DR.
City-St-Zip: APOPKA, FL 32712

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: CECILIA LOUZADA

VP

04/16/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date