2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000138411

Entity Name: X-TREME CYCLE TOYZ, INC.

FILED Feb 22, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

4168 WESTROADS DRIVE, UNIT C 4168 WESTROADS DRIVE, UNIT B RIVIERA BEACH, FL 33407 RIVIERA BEACH, FL 33407

Current Mailing Address: New Mailing Address:

4168 WESTROADS DRIVE, UNIT B 4168 WESTROADS DRIVE, UNIT C RIVIERA BEACH, FL 33407 RIVIERA BEACH, FL 33407

FEI Number: 27-0105652 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MURE, JAMES C SESSANO, ANTHONY J 17146 62ND ROAD NORTH 2636 WESTWAY

US LOXAHATCHEE, FL 33470 SINGER ISLAND, FL 33404 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: ANTHONY SESSANO 02/22/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete Title: (X) Change () Addition MURE, JAMES C SESSANO, ANTHONY J Name: Name: 17146 62ND ROAD NORTH 2636 WESTWAY #1 Address: Address:

City-St-Zip: LOXAHATCHEE, FL 33470 US City-St-Zip: SINGER ISLAND, FL 33404 US

VSTD Title: VΡ Title: () Delete (X) Change () Addition Name: MURE, KRISTINA A Name: MURE, JAMES C

17146 62ND ROAD NORTH 17146 62ND ROAD NORTH Address: Address: LOXAHATCHEE, FL 33470 US LOXAHATCHEE, FL 33470 City-St-Zip: City-St-Zip:

Title: Title: CFO (X) Delete () Change () Addition

GIBSON, SHAWN Name: Name: 6299 CHASEWOOD DR. Address: Address: City-St-Zip: JUPITER, FL 33458 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Ρ SIGNATURE: ANTHONY SESSANO 02/22/2005