# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000024009

Entity Name: CYCLE DYNAMICS, INC.

FILED Apr 05, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
--	--------------------------------------	---------------------------------

6770 LANTANA ROAD 3300 S CONGRESS AVE #20

#9 & #10

LAKE WORTH, FL 33467 BOYNTON BEACH, FL 33426

**Current Mailing Address: New Mailing Address:** 

3300 S CONGRESS AVE 6770 LANTANA ROAD #9 & #10

#20

LAKE WORTH, FL 33467 BOYNTON BEACH, FL 33426

FEI Number: 68-0602309 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:

RUSSO, STEPHANIE A RUSSO, STEPHANIE A 8843 SW 8185 LANE 120 S. OLIVE AVENUE 600 MIAMI, FL 33157

WEST PALM BEACH, FL 33401 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: 04/05/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition RUSSO, ANTHONY J RUSSO, ANTHONY J Name: Name:

1801 NORTH N STREET 1802 NORTH N STREET Address: Address: City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: LAKE WORTH, FL 33460

( ) Delete Title: VΡ Title: VΡ (X) Change ( ) Addition Name: RUSSO, PATRICIA Name: RUSSO, PATRICIA

1801 NORTH N STREET 1802 NORTH N STREET Address: Address: LAKE WORTH, FL 33460 LAKE WORTH, FL 33460 City-St-Zip: City-St-Zip:

Title: Title: VP. ( ) Delete () Change () Addition

RUSSO, MARC A Name: Name: 1802 NORTH N STREET Address: Address: City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip:

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.

Ρ SIGNATURE: ANTTHONY J RUSSO 04/05/2008