2008 FOR PROFIT-CORPORATION ANNUAL REPÖRT

FILED Apr 07, 2008 08:00 Al Secretary of State DOCUMENT # P06000041410 1. Entity Name D. W. B. CUSTOM CYCLES INC. Principal Place of Business Mailing Address 4320 SW 64TH AVE. 4320 SW 64TH AVE. **DAVIE, FL 33314** DAVIE, FL 33314 No Chg-P 03102008 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-4718627 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JOURNET, DONITA DO NOT WRITE 4320 SW 64TH AVE. **DAVIE, FL 33314** 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 04/17/08-80002-025 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE COMEGYS, B J NAME STREET ADDRESS 4921 SW 29TH TERR **DANIA, FL 35312** CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby 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 address, with all other like empowered

SIGNATURE:

OFFICER OR DIRECTOR