2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# P08000059303

Entity Name: ADVANCED PRO CYCLES, INC.

Current Principal Place of Business:

6971 SLOOP PLACE
ORLANDO, FL 32825

New Principal Place of Business:

6607 S SEMORAN BLVD
SUITE 106
ORLANDO, FL 32822 US

Current Mailing Address:

6971 SLOOP PLACE
ORLANDO, FL 32825

New Mailing Address:

6607 S SEMORAN BLVD
SUITE 106
ORLANDO, FL 32822 US

FEI Number: 26-2832879 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C WALKER & ASSOCIATES, LLC
611 N WYMORE RD
SUITE 206
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

ECFO CORPORATION
3551 W LAKE MARY BVD
SUITE 209
LAKE MARY, FL 32746 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: CATHRYN WALKER 04/17/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CORTEZ, JOSE
Address: 1805 TURQUOISE CT
City-St-Zip: KISSIMMEE, FL 34743

Title: VP ( ) Delete
Name: MENCIA, LAZARO
Address: 6971 SLOOP PLACE
City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CORTES, JOSE
Address: 1805 TURQUOISE CT
City-St-Zip: KISSIMMEE, FL 34743 US

Title: VP (X) Change ( ) Addition
Name: MENCIA, LAZARO
Address: 1666 GREEN MEADOW LANE
City-St-Zip: ORLANDO, FL 32825 US

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: JOSE CORTES P 04/17/2009
Electronic Signature of Signing Officer or Director Date