

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000192006

Entity Name: MASTER'S CYCLE WORKS, LLC

Current Principal Place of Business:

1501 NW 22ND CT. BAY 20
POMPANO BEACH, FL 33069

Current Mailing Address:

1501 NW 22ND CT. BAY 20
POMPANO BEACH, FL 33069

FEI Number: 46-3938703

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHOENGRUND, MICHAEL C MR.
1501 NW 22ND CT. BAY 20
POMPANO BEACH, FL 33063 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: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRES
Name SCHOENGRUND, MICHAEL C
Address 164 NW 80TH TERRACE
City-State-Zip: MARGATE FL 33063

Title VP
Name SCHOENGRUND, HEATHER A
Address 164 NW 80TH TERRACE
City-State-Zip: MARGATE FL 33063

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HEATHER SCHOENGRUND

OWNER

03/20/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date