

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000038816

Entity Name: CUTTING QUARTERS SH, INC

FILED
Mar 17, 2008
Secretary of State

Current Principal Place of Business:

12106 PLANTATION LAKES CIR
SANFORD, FL 32771

New Principal Place of Business:

335 WILLOWBAY RIDGE ST
SANFORD, FL 32771

Current Mailing Address:

12106 PLANTATION LAKES CIR
SANFORD, FL 32771

New Mailing Address:

335 WILLOWBAY RIDGE ST
SANFORD, FL 32771

FEI Number: 20-2486815

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUNTER, SANIECE S
12106 PLANTATION LAKES CIR
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

HUNTER, SANIECE S
335 WILLOWBAY RIDGE ST
SANFORD, FL 32771 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: SANIECE HUNTER

03/17/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: HUNTER, SANIECE S
Address: 12106 PLANTATION LAKES CIR
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: HUNTER, SANIECE S
Address: 335 WILLOWBAY RIDGE ST
City-St-Zip: SANFORD, FL 32771

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: SANIECE HUNTER

P

03/17/2008

Electronic Signature of Signing Officer or Director

Date