

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000062933

FILED  
May 03, 2004  
Secretary of State

Entity Name: PRE-CUT INTERNATIONAL, INC.

**Current Principal Place of Business:**

7441 N.W. 78TH STREET  
MEDLEY, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

7441 N.W. 78TH STREET  
MEDLEY, FL 33166

**New Mailing Address:**

FEI Number: 65-0602958

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MOYAL, PATRICK R  
82 N. UNIVERSITY DRIVE  
PEMBROKE PINES, FL 33024 US

**Name and Address of New Registered Agent:**

MOYAL, PATRICK R  
208 N. UNIVERSITY DRIVE  
PEMBROKE PINES, FL 33024 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

05/03/2004

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: TRUJILLO, JORGE  
Address: 7441 N.W. 78TH STREET  
City-St-Zip: MEDLEY, FL 33166

Title: VTD ( ) Delete  
Name: FREWA, PAOLA  
Address: 7441 N.W. 78TH STREET  
City-St-Zip: MEDLEY, FL 33166

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAOLA FREWA

Electronic Signature of Signing Officer or Director

VTD

05/03/2004

Date