

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000085156

**Entity Name:** A CUT ABOVE ALL, INC.

**Current Principal Place of Business:**

832 NW 133 AVENUE  
SUNRISE, FL 33325

**FILED**  
**May 01, 2015**  
**Secretary of State**  
**CC3551196639**

**Current Mailing Address:**

832 NW 133 AVENUE  
SUNRISE, FL 33325

**FEI Number: 20-0127691**

**Certificate of Status Desired: No**

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

ZVI RAFILOVICH, CPA, P.A.  
2229 SHERIDAN STREET  
HOLLYWOOD, FL 33020 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

**Officer/Director Detail :**

Title P  
Name ALTMAN, DAFNA  
Address 832 N.W. 133 AVE.  
City-State-Zip: SUNRISE FL 33325

Title VP  
Name ALTMAN, NADAV  
Address 832 N.W. 133 AVE.  
City-State-Zip: SUNRISE FL 33325

*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 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 all other like empowered.*

**SIGNATURE: NADAV ALTMAN**

**PRESIDENT**

**05/01/2015**

Electronic Signature of Signing Officer/Director Detail

Date