

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Mar 19 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 583774

(5)

1. Corporation Name

C. & M. CUTTING, INC.

Principal Place of Business

7237 N.W. 32ND ST.
MIAMI FL 33122
US

Mailing Address

7237 N.W. 32ND ST.
MIAMI FL 33122-1217
US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/30/1978		3a. Date of Last Report 04/29/1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FIC Number 59-1843941		Applied for Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			

9. Name and Address of Current Registered Agent

CHESTLER, HERBERT L.
3599 LOIRE LANE
PALM BEACH GARDENS FL 33410

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
13853 MONACO WAY
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and office, if applicable

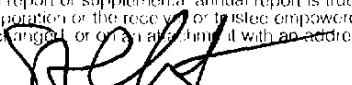
NOTE: Registered Agent signature not required when not installed

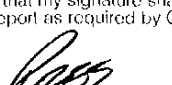
DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	ST	☐ DELETE		11 TITLE		☐ Change ☐ Addition	
NAME	CHESTLER, STEVE			12 NAME			
STREET ADDRESS	1411 BROADWAY			13 STREET ADDRESS			
CITY- ST- ZIP	NEW YORK NY			14 CITY- ST- ZIP			
TITLE	D	☐ DELETE		21 TITLE		☒ Change ☐ Addition	
NAME	CHESTLER, HERBERT			22 NAME			
STREET ADDRESS	3599 LOIRE LANE			23 STREET ADDRESS	13853 MONACO WAY		
CITY- ST- ZIP	PALM BEACH GARDENS FL			24 CITY- ST- ZIP			
TITLE		☐ DELETE		31 TITLE		☐ Change ☐ Addition	
NAME				32 NAME			
STREET ADDRESS				33 STREET ADDRESS			
CITY- ST- ZIP				34 CITY- ST- ZIP			
TITLE		☐ DELETE		41 TITLE		☐ Change ☐ Addition	
NAME				42 NAME			
STREET ADDRESS				43 STREET ADDRESS			
CITY- ST- ZIP				44 CITY- ST- ZIP			
TITLE		☐ DELETE		51 TITLE		☐ Change ☐ Addition	
NAME				52 NAME			
STREET ADDRESS				53 STREET ADDRESS			
CITY- ST- ZIP				54 CITY- ST- ZIP			
TITLE		☐ DELETE		61 TITLE		☐ Change ☐ Addition	
NAME				62 NAME			
STREET ADDRESS				63 STREET ADDRESS			
CITY- ST- ZIP				64 CITY- ST- ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or changed and added with an address.

SIGNATURE:



 3/19/97 59-184394-1600

CR2E034 (9/96)