

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F47548

Entity Name: CUT-IT, INC.

**FILED**  
**Mar 14, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

% STACEY LAUER  
4330-A WEST BROWARD BLVD.  
PLANTATION, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

% STACEY LAUER  
4330-A WEST BROWARD BLVD.  
PLANTATION, FL 33317

**New Mailing Address:**

FEI Number: 59-2132504

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LAUER, STACEY  
4330 W. BROWARD BLVD  
SUITE A  
PLANTATION, FL 33317 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: LAUER, STACEY  
Address: 4330 W BROWARD BLVD  
City-St-Zip: PLANTATION, FL 00000,

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: STACEY LAUER

PRES

03/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date