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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

1. Corporation b	MENT # <b>H771</b> 1 TTER CUTTER, INC.	12 (1)					
WIN. GU	TIEN COTTEN, INC.						
Principal Place of	of Business	Mailing Address				1196 OIBI) BIOIL BIOIL D	
% CHARLES W. DAVIS 3121 S.W. WAALER STREET STUART FL 34997		% Charles W. Davis 3121 S.W. Waaler Street Stuart Fl 34997		Date Incorporated or Qualified	3a. Date of Las		
					09/20/1985	07/20/	1
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number 59-2581216		Applied For Not Applicable
21   Suite, Apt. #,	, elc.	Suite, Apt. #. etc.			5. Certificate of Status Desired	\$8.	75 Additional
22		27	27				ee Required
City & State		City & State			Election Campaign Financing     Trust Fund Contribution		.00 May Be
23   Žip	Country	Zφ	Countr	у	8. This corporation has liability for i	intangible tax unde	
24	25	29	30			□No	
	9. Name and Address of Curre	ent Registered Agent	81	I Nanie	10. Name and Address of New R	legistered Agent	
, NOT 00	110 AD		6				
RICE, CRAIG SR. 3121 SE WAALER STREET			8		t Address (P.O. Box Number is Not Acceptable)		
STUART			8:	3			
	, • • • • • • • • • • • • • • • • • • •		84	1 City		FI 85	Zip Code
44.5	the section 607.00	00 and 007 1509. Florido Statut	os the above	named como	ration submits this statement for the pur		its registered office
or registere	id agent, or both, in the State of Flo n, and accept the obligations of. Se	nich. Seich chance was authorz	ed by the cor	poration's boa	rd of directors. I hereby accept the app	ointment as registe	ered ägent. Lani
ramiliar witr	, one same	Digit 007.0005, Flor-da Grardres	i.				
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certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall rave the same legal effect as in make that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13/ changed, or on an attachment with an address

SIGNATURE: ...

NTEO NAME OF SIGNING OFFICER OR DIRECTOR