

# **2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# H98811

**FILED**  
**Apr 24, 2006**  
**Secretary of State**

**Entity Name:** TRUE CUT CONSTRUCTION, INC.

## **Current Principal Place of Business:**

MICHAEL A PETZ  
11090 DELTA CIRCLE  
BOCA RATON, FL 33428

## **New Principal Place of Business:**

TIMOTHY A PETZ  
9730 ALASKA CIRCLE  
BOCA RATON, FL 33434

## **Current Mailing Address:**

MICHAEL A PETZ  
11090 DELTA CIRCLE  
BOCA RATON, FL 33428

## **New Mailing Address:**

TIMOTHY A PETZ  
9730 ALASKA CIRCLE  
BOCA RATON, FL 33434

**FEI Number:** 59-2677746

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PETZ, MICHAEL A  
11090 DELTA CIRCLE  
BOCA RATON, FL 33428 US

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

PETZ, TIMOTHY A  
9730 ALASKA CIRCLE  
BOCA RATON, FL 33434 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: TIMOTHY A PETZ

04/24/2006

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PETZ, MICHAEL A  
Address: 11090 DELTA CIRCLE  
City-St-Zip: BOCA RATON, FL 33428

Title: VP (X) Delete  
Name: PETZ, PATRICIA A  
Address: 11090 DELTA CIRCLE  
City-St-Zip: BOCA RATON, FL 33428

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

Title: P (X) Change ( ) Addition  
Name: PETZ, TIMOTHY A  
Address: 9730 ALASKA CIRCLE  
City-St-Zip: BOCA RATON, FL 33434

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 Chapter 119, 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: TIMOTHY A PETZ

P

04/24/2006

Electronic Signature of Signing Officer or Director

Date