2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000000755

Address:

City-St-Zip:

1726 MONTICELLO ST

DELTONA, FL 32725 US

Entity Name: A CUT ABOVE CATERING, LLC

FILED May 06, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 616 BUCKINGHAM DRIVE OVIEDO, FL 32765 **Current Mailing Address: New Mailing Address:** 616 BUCKINGHAM DRIVE OVIEDO, FL 32765 FEI Number: 01-0577173 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MOSELEY, THEODORE F 616 BUCKÍNGHAM DRIVE OVIEDO, FL FL 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 **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** MGRM () Change () Addition () Delete MOSELEY, THEODORE F Name: Name: 616 BUCKINGHAM DRIVE Address: Address: City-St-Zip: OVIEDO, FL 32765 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition PHELPS, CHAD Name: Name: Address: 401 TIMBERGLEN CT Address: City-St-Zip: WINTER SPRINGS, FL 32708 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition WARING, STEVE Name: Name: Address: 410 TANGELO DR Address: City-St-Zip: SANFORD, FL 32771 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DUERR, PATRICIA Name: Name: 1004 SUMMER WIND DRIVE Address: Address: City-St-Zip: WINTER PARK, FL 32792 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition RIVERA, SANTIAGO Name: Name: 1720 PINE BAY DR Address: Address: City-St-Zip: LAKE MARY, FL 32746 US City-St-Zip: Title: (X) Delete Title: () Change () Addition SPITTLER, RANDALL E Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Address:

City-St-Zip:

SIGNATURE: THEODORE F MOSELEY MGRM 05/06/2003