

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000000555

Entity Name: CUT N TRIM CARPENTRY, LLC

FILED
Apr 21, 2005
Secretary of State

Current Principal Place of Business:

401 MAPLE STREET
SEBASTIAN, FL 32958

New Principal Place of Business:

Current Mailing Address:

401 MAPLE STREET
SEBASTIAN, FL 32958

New Mailing Address:

FEI Number: 81-0612619

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

GONZALEZ, JASON L
401 MAPLE ST
SEBASTIAN, FL 32958 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: JASON L. GONZALEZ

04/21/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: GONZALEZ, JASON
Address: 401 MAPLE STREET
City-St-Zip: SEBASTIAN, FL 32958

Title: MGRM () Delete
Name: COSNER, RANDY
Address: 401 MAPLE STREET
City-St-Zip: SEBASTIAN, FL 32958

Title: MGRM () Delete
Name: GONZALEZ, TONY
Address: 401 MAPLE STREET
City-St-Zip: SEBASTIAN, FL 32958

Title: MGRM () Delete
Name: GONZALEZ, RESTY
Address: 1310 13TH ST SW
City-St-Zip: VERO BEACH, FL 32967

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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.

SIGNATURE: RANDY COSNER

MGRM

04/21/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date