FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: 1



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 18 1997 8:00am

Secretary of State

394-04-41

Secretary of State DIVISION OF CORPORATIONS

1997

1. Corporation	MENT # L77008 Cutters, INC.	(5)			
Principal Place		Mailing Address		e rathirain den room endin daish dibina nom	Mtbit Affir Bjöji Afast Affir Affir tall i
601 ELCKAM C B-3	IRCLE	801 ELCKAM CIRCLE 8-3			
MARCO ISLAND	FL 33937	MARCO ISLAND FL 34146-0	003		
US		US		3. Date Incorporated or Qualified 05/29/1990	3a. Date of Last Report 04/16/1996
	lace of Business N. Column Buts	28. Mailing Address	DIVA	4. FEI Number	Applied For
21 7 50 1 Suite, Apt.		26 9.30 N. Coll. Suite, Apt. #, etc.	ACK D-O	03/02/0293	SQ 75 Additional
22 # >	02-	27 # 202		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 7 744-1	eco Ishand, FL			Trust Fund Contribution	Added to Fees
Zip 24 3 441	Kar Gountry U.S	29 34145	Sol US	1	
۱ *) حتر (۲ ا	9. Name and Address of Curren		501 74.5		
HAU	SLER, GARY J.		81 Name	LCIER COMY T	
	ELCKAM CIRCLE		82 Street Add	ress (P.O. Box Number is Not Acceptal	ple) 🔐
B-3	00 101 AND FL 00003		9.30	N. COLLIER BLV	لهمله د
MAK	SO ISLAND FL 33937		63		
			3. Date Incorporated or Qualified 05/29/1990 4. FEI Number		
11. Pursuant	to the provisions of Syctions 607.050	2 and 607 /508, Florida Statutes	s, the above-named corp	poration submits this statement for the	purpose of changing its registered
office or re agent. I a	egistered agont, or both, in the State m familiar with, and agoepy the oblig	of floods Such change was au floor of Section 607.0505, Flor	ithorized by the corporal ida Statutes.	tion's board of directors. I hereby acce	pt the appointment as registered
SIGNATURE	Cay VI	Spale			41597
	Signature, typod or printed name of legister d Aug. OFFICERS AND	nt and title if applicable (NOTE: DIRECTORS			DATE
12. TiTLF	D OFFICE AND	DELETE		ADDITIONS/CHANGES TO OFFIC	
NAME	FAZIO, JOSEPH				
STREET ADDRESS	425 ADIRONDACK CT		1.3 STREET ADDRESS		
CITY-\$1.7P	MARCO ISLAND FL		1.4 CITY - ST - ZIP		
THEF		☐ DELETE	2.1 TITLE		Change Addition
NAME					•
STREET ADORESS			· I	F	
CITY+S1+ZIP TITLE		☐ DELETE	-		Change Additio
NAME					The state of the state of
STREET ADDRESS					
CITY-ST-ZIF			3.4. CITY - ST - ZIP	***************************************	
₹∺TL€		DELETE	4.1 TITLE		Change Addition
NAME					
STREET ADDRESS			1		
CITY-ST-ZIP TITLE		DELETE			Change Additio
NAME		hand when in			And a series
STREET ADDRESS					
City-St-ZiP	,		5.4 City - ST - ZiP		
TITLE		☐ DELETE	6.1 TIFLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS					
City-St-ZiP	by certify that the information supplier	with this filing does not qualify	6.4 CITY-ST-ZIP	d in Section 119 07/31/(). Florida Statute	as I further certify that the
informatio	on indicated on this annual reporter's	upplemental annual report is tru	e and accurate and tha	I my signature shall have the same legant	al effect as if made under oath; the
appears i	in Block 12 or Block 13 if changed of	on a cceltachme nt with an addr	ess.	it as required by Chapter 607, Florida t	otatutes; and that my name