2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

SIGNATURE A

Apr 30, 2005 08:00 AM **Secretary of State** DOCUMENT # P00000087895 1. Entity Name A GREENER CUT, INC. Principal Place of Business Mailing Address 7709 GIBRALTER CT. -7709 GIBRALTER CT. ST. PETERSBURG, FL 33709 ST. PETERSBURG, FL 33709° 03112005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3671532 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent AMRHEIN, JAMES DO NOT WRITE 7709 GIBRALTER CT. ST. PETERSBURG, FL 33709 IN THIS SPACE 3. 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 I am familiar with, and accept the obligations of registered agent. May Callaga SIGNATURE. Signature, typed of printed name of registered agent and little if applicable NOTE Registered Apent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE AMRHEIN, JAMES NAME U00000347833 STREET ADDRESS 7709 GIBRALTER CT u4/30/05-80132-025 1**50.**00 CITY-ST-ZIP SAINT PETERSBURG, FL 33709 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information cupd indicated on this report or supplemental of the corporation or the receiver for trust changed, or on an attachment with an ac-Tied with this filling does not qualify for the exemption stated in Section 119.07(3)(7), Florida Statutes 1 further certify that the information I leport is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director it de empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if different with the empowered.

ME OF SIGNING OFFICER OR DIRECTOR

FILED