## 2004 FOR PROFIT CORPORATION

## **ANNUAL REPORT DOCUMENT # P01000102397**

CUTTING EDGE CONSTRUCTION, INC.



**FILED** May 03, 2004 08:00 AM Secretary of State

Principal Place of Business

1206 N.W. 72ND AVENUE MIAMI, FL 33126

Mailing Address

1206 N.W. 72ND AVENUE MIAMI, FL 33126



## DO NOT WRITE IN THIS SPACE

CR2E034 (10/03) 04272004 No Chg-P

> Applied For Not Applicable

5. Certificate of Status Desired

20/05/2/14

Daytime Phone #

65-1146380

4. FEI Number

\$8.75 Additional

6. Name and Address of Current Registered Agent

DEL VALLE, HUMBERTO

SIGNATURE:

## NOT WOITE

1206 N.W. 72ND AVENUE MIAMI, FLORIDA, FL 33126			IN THIS SPACE		
	named entity submits this statement for the points of registered agent.	urpose of changing its registered offi	e or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if	applicable. (NOTE Registered Agent	signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Financing     Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DEL VALLE, HUMBERTO 1206 N.W. 72ND AVENUE MIAMI, FL 33126				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					000000151871 05/04/04-80060-022 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby indicated of the co-	certify that the information supplied with this fit on this report or supplemental report is true a representation or the receiver or trustee empowered, or on all attachment with an address, with all	ling does not sualify for the exemption adjurate and that my signature so to execute this leport as required but other like exported.	n state hall ha y Char	ed in Section 119.07(3 ve the same legal effector 607, Florida Statul	XI), Florida Statutes, I further certify that the information act as if made under oath, that I am an officer or director tes; and that my name appears in Block 10 or Block 11 if

NG OFFICER OR DIRECTOR