

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000009672

Entity Name: XTREME CUTS, INC.

FILED
Apr 25, 2005
Secretary of State

Current Principal Place of Business:

13371 SW 42ND ST.
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

13371 SW 42ND ST.
MIAMI, FL 33175

New Mailing Address:

FEI Number: 71-0871964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERNANDEZ, CARIDAD
49 N.W. BLVD.
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

HERNANDEZ, CARIDAD
14819 SW 82ND ST.
MIAMI, FL 33193 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: CARIDAD HERNANDEZ

04/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HERNANDEZ, CARIDAD
Address: 49 N.W. BLVD.
City-St-Zip: MIAMI, FL 33126

Title: V () Delete
Name: GARCIA, HECTOR L
Address: 14819 SW 82ND ST.
City-St-Zip: MIAMI, FL 33193

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HERNANDEZ, CARIDAD
Address: 14819 SW 82ND ST.
City-St-Zip: MIAMI, FL 33193

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARIDAD HERNANDEZ

PRES

04/25/2005

Electronic Signature of Signing Officer or Director

Date