


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # <u>PO2000038696</u>	
1. Entity Name <u>S. CUTLER PARTNERS, INC</u>	

FILED

03 OCT -6 AM 9:13

SECRETARY OF STATE
TALLAHASSEE-FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <u>5241 GLENVILLE DR</u>	3. Mailing Address <u>SAME</u>
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State <u>BOYNTON BEACH, FL</u>	City & State
Zip <u>33437</u>	Country <u>PB</u>

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE	4. FEI Number		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
	7. Name and Address of Current Registered Agent		
	Name <u>DARIN WADE MCGILVER, ESQ.</u>		
	Street Address (P.O. Box Number is Not Acceptable) <u>225 NORTHERN MINER BLVD</u> <u>SUITE 300</u> City <u>BOCA RATON</u> FL Zip Code <u>33432</u>		

8. 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.

SIGNATURE DARIN WADE MCGILVER, ESQ. IN ABSENCE 9-30-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when translating) DATE

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>PSTD</u> <u>STEPHEN J. CUTLER</u> <u>5241 GLENVILLE DR</u> <u>BOYNTON BEACH FL 33437</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>900023559409</u> <u>10/06/03-01005-017 **150.00</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 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 in Block 10 or on an attachment with an address, with all other fees empowered.

SIGNATURE: STEPHEN J. CUTLER 9-30-03 861-375-8603
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)

STEPHEN J. CUTLER

5241 GLENVILLE DRIVE
BOYNTON BEACH, FLORIDA 33437

OFFICE: 561-375-8603
FACSIMILE: 561-375-7885

HOME: 561-375-7877
E-MAIL: scutler@myexcel.com

Florida Department of State

Division of Corporations

P.O. Box 6327

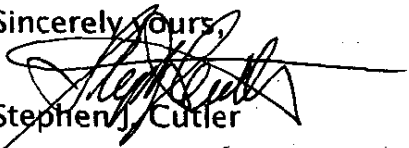
Tallahassee, FL 32314

September 10, 2003

As per our telephone conversation this date I have enclosed my check in the amount of \$150.00 as instructed. Unfortunately I did not receive the information that was supposed to be mailed to me in January. As a new Florida resident and even newer corporate officer I was unaware of the annual procedure. It will not happen again.

Thank you for your consideration.

Sincerely yours,



Stephen J. Cutler

S. Cutler Partners, Inc.