2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000112637

VEQUESTA, FL 33469

City-St-Zip:

FILED Mar 11, 2006 Secretary of State

Entity Name: AAA CUTTING EDGE, INC. **Current Principal Place of Business: New Principal Place of Business:** 2049 S.W. 44TH STREET GAINESVILLE, FL 32608 **Current Mailing Address: New Mailing Address:** 2049 S.W. 44TH STREET GAINESVILLE, FL 32608 FEI Number: 56-2302367 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ORVIS, KEILOR 2049 S.W. 44TH STREET GAINESVILLE, FL 32608 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ORVIS, KEILOR Name: Name: 2049 S.W. 44TH STREET Address: Address: City-St-Zip: GAINESVILLE, FL 32608 City-St-Zip: () Delete Title: DS Title: (X) Change () Addition Name: ORVIS. LACENE Name: ORVIS LACENE 19469 PINETREE DRIVE Address: 9230 CYPRESS HOLLOW DRIVE Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: KEILOR ORVIS **PRES** 03/11/2006

PALM BEACH GARDENS, FL 33418