2005 FOR PROFIT CORPORATION ANNUAL REPORT

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

FILED Apr 04, 2005 08:00 AM Secretary of State

| ANNOAL REPORT | | | | Apr 04, 2005 06:00 A | | |
|---|--|---|----------|------------------------------|--------------------|---|
| 1. Entity Nar | IMENT # P0300013770 | 05 | | | | retary of State |
| 8074 31 AV | /E NORTH | Mailing Address 8074 31 AVE NORTH ST PETERSBURG, FL 33710 | | | | |
| С | OO NOT WRITE I | | CE | 03302005 4. FEI Numbe 20-041 | No Chg-P | CR2E034 (10/03) Applied For Not Applicable \$8.75 Additional Fee Required |
| 5. Name and Address of Current Registered Agent KUTTLER, CARL M III 8074 31 AVE NORTH ST PETERSBURG, FL 33710 | | | | IN 7 | NOT W | PACE |
| 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. Hyped or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE | | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution. | | | | 00 May Be ed to Fees | | |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | OFFICERS AND DIRE PRES KUTTLER, CARL M III 8074 31 AVE NORTH ST PETERSBURG, FL 33710 | CTORS | | | Unonn 04/04/05- | 0287551 -80075-009 150.00 |
| CITY-ST-ZIP IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | | | - | | NOT W | |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | |

SIGNATURE: Kutter Kitchens, Inc by Carlin Kutter III as its President 3/31/05 727345-8342

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Days Days Thomas

^{12.} I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.