

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000011395

Entity Name: CUTS BY SANDY, INC.

FILED
Apr 20, 2005
Secretary of State

Current Principal Place of Business:

9501 ARLINGTON EXPRESSWAY, STE. 545
JACKSONVILLE, FL 32211

New Principal Place of Business:

10131 ATLANTIC BOULEVARD
JACKSONVILLE, FL 32225

Current Mailing Address:

P.O. BOX 16952
JACKSONVILLE, FL 322456952

New Mailing Address:

FEI Number: 20-0788859

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEAL, SANDY
9501 ARLINGTON EXPRESSWAY, STE. 545
JACKSONVILLE, FL 32211 US

Name and Address of New Registered Agent:

NEAL, SANDY
10131 ATLANTIC BOULEVARD
JACKSONVILLE, FL 32225 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: SANDY NEAL

04/20/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: NEAL, SANDY
Address: 6100 ARLINGTON EXPRESSWAY, APT. L 101
City-St-Zip: JACKSONVILLE, FL 32211

Title: D () Delete
Name: NEAL, SANDY
Address: 6100 ARLINGTON EXPRESSWAY, APT. L 101
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: NEAL, SANDY
Address: 6100 ARLINGTON EXPRESSWAY, APT. J202
City-St-Zip: JACKSONVILLE, FL 32211

Title: D (X) Change () Addition
Name: NEAL, SANDY
Address: 6100 ARLINGTON EXPRESSWAY, APT. J202
City-St-Zip: JACKSONVILLE, FL 32211

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: SANDY E NEAL

MGR

04/20/2005

Electronic Signature of Signing Officer or Director

Date