

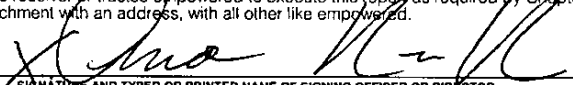


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 04, 2005 8:00 am**  
**Secretary of State**

05-04-2005 90191 022 \*\*\*150.00

<b>DOCUMENT # P04000040607</b> 1. Entity Name <b>TIPS &amp; CUTS CORP.</b>																	
Principal Place of Business <b>7618 SUN VISTA WAY ORLANDO, FL 32822 US</b>			Mailing Address <b>7618 SUN VISTA WAY ORLANDO, FL 32822 US</b>														
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.		<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">50048679</div>  <div style="display: flex; justify-content: space-around; font-weight: bold;"> <span>04272005</span> <span>Chg-P</span> <span>CR2E034 (10/03)</span> </div>													
City & State		City & State															
Zip		Zip															
Country		Country															
4. FEI Number <div style="font-size: 1.5em; font-weight: bold;">20-0831028</div>				Applied For <input type="checkbox"/> Not Applicable													
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				<div style="font-size: 1.5em; font-weight: bold;">04272005</div> <div style="font-size: 1.5em; font-weight: bold;">Chg-P</div> <div style="font-size: 1.5em; font-weight: bold;">CR2E034 (10/03)</div>													
6. Name and Address of Current Registered Agent  <b>NIN RAMIREZ, ANA 1336 OKALOOSA AVE. ORLANDO, FL 32822</b>																	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City																	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																	
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">P</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>NIN RAMIREZ, ANA</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1336 OKALOOSA AVE.</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>ORLANDO, FL 32822</td> <td></td> </tr> </table>		TITLE	P	<input type="checkbox"/> Delete	NAME	NIN RAMIREZ, ANA		STREET ADDRESS	1336 OKALOOSA AVE.		CITY-ST-ZIP	ORLANDO, FL 32822	
TITLE	P	<input type="checkbox"/> Delete															
NAME	NIN RAMIREZ, ANA																
STREET ADDRESS	1336 OKALOOSA AVE.																
CITY-ST-ZIP	ORLANDO, FL 32822																
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>		TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			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 report 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.			
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition															
NAME																	
STREET ADDRESS																	
CITY-ST-ZIP																	
SIGNATURE:  <span style="float: right; font-size: 1.2em;">04-27-01</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small> <span style="float: right;"><small>Daytime Phone #</small></span>															