

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 13, 2005 08:00 AM
Secretary of State

DOCUMENT # P95000088053
1. Entity Name
ISLAND CUT INVESTMENT GROUP, INC.



Principal Place of Business Mailing Address
1101 9TH AVE. W. - 1101 9TH AVE. W.
BRADENTON, FL 34205 BRADENTON, FL 34205

DO NOT WRITE IN THIS SPACE



04082005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
65-0625835 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CABANILLAS, DENISE
1101 9TH AVE. WEST
BRADENTON, FL 34205

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|-----------------|-----------------------------|
| TITLE | D |
| NAME | CABANILLAS, DENISE |
| STREET ADDRESS | 1101 9TH AVE. W. |
| CITY - ST - ZIP | BRADENTON, FL 34205 |
| TITLE | D |
| NAME | KENNEDY, JOSEPH |
| STREET ADDRESS | 1529 43RD AVENUE DRIVE WEST |
| CITY - ST - ZIP | PALMETTO, FL 34221 |
| TITLE | D |
| NAME | STEPHENSON, JAMES F JR |
| STREET ADDRESS | 4317 PINFISH LANE |
| CITY - ST - ZIP | PALMETTO, FL 34221 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |

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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 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.

SIGNATURE: *Denise Cabanillas* 4/8/05 941 750 8118
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #