

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 16 1998 8:00am
Secretary of State

DOCUMENT # P97000039176 (7)

1. Corporation Name

A PROFESSIONAL CUT, INC.

Principal Place of Business

431 WILSON BLVD SOUTH
NAPLES FL 34117

Mailing Address

431 WILSON BLVD SOUTH
NAPLES FL 34117

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/01/1997

4. FEI Number

59-3443774

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 640 14th Ave N.W.

Suite, Apt. #, etc.

22

City & State

23 NAPLES FL

24 34120

25 USA

2a. Mailing Address

26 640 14th Ave N.W.

Suite, Apt. #, etc.

27

City & State

28 NAPLES FL

29 34120

30 USA

9. Name and Address of Current Registered Agent

WORSDALE, DANIEL
431 WILSON BLVD SOUTH
NAPLES FL 34117

10. Name and Address of New Registered Agent

81 Name

DANIEL Worsdale

82 Street Address (P.O. Box Number is Not Acceptable)

640 14th Ave N.W.

83

84

City NAPLES

FL

85 Zip Code

34120

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Daniel Worsdale

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

21 JAN 98

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE

NAME WORSDALE, DANIEL
STREET ADDRESS 431 WILSON BLVD SOUTH
CITY - ST - ZIP NAPLES FL 34117

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition

1.2 NAME DANIEL Worsdale
1.3 STREET ADDRESS 640 14th Ave N.W.
1.4 CITY - ST - ZIP Naples, FL 34120

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Daniel Worsdale

4/14/98 (941)353-5218

CR2E034 (10/97)