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PROFIT
CORPORATION
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P97000053964 \( \)

SCISSORS UNIQUE, INC.

SIGNATURE: Pamela Moser

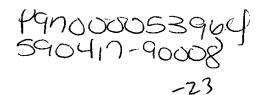
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## FILED Jul 19, 1999 8:00 am Secretary of State

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(904) 797-7080

Principal Place of Business Mailing Address						I if fillige ven ibitt eggs	<b></b>		144 (11) 11 11114		
2796 US 1 SOUTH 2796 US 1 SO									•		
ST AUGUSTINE	FL 32086	ST AUGUSTINE FL 32086	ST AUGUSTINE FL 32086			20 N	DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualifed				
						06/18/1997					
2 Principal Pl	ace of Business	2a Mailing Address	2a, Mailing Address			4. FEI Number			Ap	plied For	
21	•	26	h						No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<del></del>			5. Certificate of Status De	sired		\$8.75 A		
City & State	9	City & State				Election Campaign Fin     Trust Fund Contribution		O	\$5.00 Added t		
Zip	Country	Zip				a. This corporation owes	the currer	nt year Inta	ingible		
24	25	29	30	<del>,</del>		Personal Property Tax	<del></del>		□Yes	□No	
	g. Name and Address of Curre	nt Registered Agent		81	<del></del>	10. Name and Address o	New Re	gistered /	gent		
FILINGS, INC.					Name	Pamela Moser					
	N.W. 16TH STREET					ess (P.O. Box Number is Not Acceptable)					
	AUDERDALE FL 33311-4132	•	2796			US 1 South					
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				84	<sup>City</sup> St.	Augustine		FL	85 7ip 8	9de	
	to the provisions of Sections 607.05	00 -1 007 1500 Florido Statuta	a the e	1	d		for the n		1		
office or re	enistered enent or both in the State	e of Finrida. Such change was at	uthoriziec	ı bv il	he corpora	tion's board of directors. I hereb	y accept	the appoin	tment as re	gistered	
agent. I ar	m familiar with, and accept the oblig	ations of, Section 507.0505, Flor	ida Stati	utes.	11-	& Money				1	
SIGNATURE	Pamela Moser, Req Signature, typed or printed name of registered ag	istered Agent (NOTE	Ragislared	Adent	Slobabire redu	ings when reinstawig)	4/	26/99	<del>!</del>	<del></del>	
12.		NO DIRECTORS	13.			ADDITIONS/CHANGES	TO OFF	CERS AN	DIRECTO	RS IN 12	
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NAME	MOSER, PAMELA J		12 N	AME	-	<b>D</b>			••		
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CiTV. ST. 780	•			TY-ST					···		
a a l bassby a	ertify that the information supplied on this annual report or supplement	with this filing does not qualify for	the exe	mptic	n stated in	Section 119.07(3)(i), Florida Si	atutes. I 1	further cert	ify that the i	nformation am an	
officer or i	on this annual report or supplement director of the corporation or the rec or Block 13 if changed, or on an atta	eiver or trustee empowered to e	xecule li	nis re	DOMAS FOO	uired by Chapter 607, Florida S	itatutes; a	and that m	name appl	ears in	



Scissor's Unique, Inc. 2796 US 1 South St. Augustine, FL 32086 (904) 797-7080

July 12, 1999

Division of Corporations Annual Reports Filings P.O. Box 1500 Tallahassee, FL 32302-1500

To Whom It May Concern:

This letter is furnish pursuant to telephone conversation with your office pertaining to lost 1999 Corporation Annual Report.

The Corporation Annual Report for 1999, Document # P97000053964, was prepared and mailed to your office on April 26, 1999, along with check # 296 in the amount of \$150.00. Upon receipt of the May bank statement, the above referenced check had not been presented against our account. Further inquiries with our bank revealed this check had not cleared during June and is apparently lost.

Enclosed is a copy of the Corporation Annual Report submitted and a replacement check for \$150.00. Per instructions, I am requesting the abatement of any penalties.

If the copy of the original form is not satisfactory, please advise the undersigned and another original will be prepared.

Thank you for your assistance in this matter.

Scissors Unique, Inc.
BY: Farxela of Moser

Pamela Moser President/Director