

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 20, 2004 8:00 am
Secretary of State

08-20-2004 90007 007 ***150.00

DOCUMENT # P98000072849

1. Entity Name
OPTICUT LASERS, INC.



Principal Place of Business
215 SW 21ST TERRACE
FORT LAUDERDALE, FL 33312

Mailing Address
215 SW 21ST TERRACE
FORT LAUDERDALE, FL 33312

2. Principal Place of Business
298 South Drive
Suite, Apt. #, etc.

3. Mailing Address
298 South Drive
Suite, Apt. #, etc.



08112004 Chg-P CR2E034 (10/03)

City & State
Islamorada, FL
Zip 33036 Country Monroe

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Islamorada, FL
Zip 33036 Country Monroe

4. FEI Number
65-0856722
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
RUPPERT, JOHN M
215 SW 21ST TERRACE
FORT LAUDERDALE, FL 33312

7. Name and Address of New Registered Agent
Name S. Anthony Miniea
Street Address (P.O. Box Number is Not Acceptable)
298 South Drive
City Islamorada FL Zip Code 33036

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 *[Signature]*
Signature, typed or printed name of registered agent and then applicable.

(NOTE: Registered Agent signature required when reinstating)

8/17/04
DATE

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	RUPPERT, JOHN M	
STREET ADDRESS	1607 SE 12TH COURT	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33312	
TITLE	TD	<input type="checkbox"/> Delete
NAME	MINIEA, ANTHONY	
STREET ADDRESS	298 SOUTH DRIVE	
CITY-ST-ZIP	ISLAMORDA, FL 33036	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<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 affidavit with all other lines empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/17/04 (305) 853-2522
Date Daytime Phone #



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

August 11, 2004

OPTICUT LASERS, INC.
298 south drive
ISLAMORADA, FL 33036

SUBJECT: OPTICUT LASERS, INC.
Ref. Number: P98000072849

We have received your check(s) totaling \$150.00; however it cannot be processed and is being returned for the following:

There was not a completed annual report/uniform business report form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Katrina Sutphin

Letter Number: 704A00049828

Attachment 240804914
P98000072849
Opticut Lasers, Inc.
298 South Drive
Islamorada, FL 33036

August 2, 2004

Florida Department of State
P.O. Box 6327
Tallahassee, FL 32314

RE: P98000072849

Gentlemen:

We have moved our Principal Address to the above location and did not receive the renewal notice. Please find our check for \$150 for 2004. Please waive the penalty.

Very truly yours,



S. Anthony Miniea, Treasurer and Director