2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2005
Secretary of State

DOCUMENT# P99000000828

Entity Name: ADVANCE QUALITY CUTTING INC.

Current Principal Place of Business:

3590 N.W. 71ST STREET
MIAMI, FL 33145

New Principal Place of Business:

19430 NW 10TH STREET
PEMBROKE PINES, FL 33029

Current Mailing Address:

3590 N.W. 71ST STREET
MIAMI, FL 33145

New Mailing Address:

19430 NW 10TH STREET
PEMBROKE PINES, FL 33029

FEI Number: 65-0884324 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUIS, MAGALLY
19430 N.W. 10TH STREET
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

LUIS, MAGALLY
19430 N.W. 10TH STREET
MIAMI, FL 33029 US

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.

SIGNATURE: MAGALLY LUIS 04/04/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LUIS, MAGALLY
Address: 19430 N.W. 10TH ST.
City-St-Zip: PEMBROKE PINES, FL 33129

Title: D ( ) Delete
Name: LUIS, JOSE R
Address: 19430 N.W. 10TH ST.
City-St-Zip: PEMBROKE PINES, FL 33129

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: LUIS, MAGALLY
Address: 19430 N.W. 10TH ST.
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D (X) Change ( ) Addition
Name: LUIS, JOSE R
Address: 19430 N.W. 10TH ST.
City-St-Zip: PEMBROKE PINES, FL 33029

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAGALLY LUIS PRES 04/04/2005
Electronic Signature of Signing Officer or Director Date