## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # **P99000041737** Jan 12, 2000 8:00 am 1. Entity Name **Secretary of State** BEST CUTLERY CORPORATION 01-12-2000 90084 015 \*\*\*150.00 Mailing Address Principal Place of Business 1104 53RD CT S 1104 53RD CT S WEST PALM BEACH FL 33407-2350 WEST PALM BEACH FL 33407 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-09 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SHELTON, ALEX C Street Address (P.O. Box Number is Not Acceptable) 1104 53RD CT S WEST PALM BEACH FL 33407 Zip Code FL 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Change ☐ Delete TITLE SHELTON, ALEX C NAME STREET ADDRESS 1104 53RD CT S STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33407 ☐ Addition ☐ Delete Change TITLE AVILA, MARLY NAME 241 SANDPIPER AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **ROYAL PALM BEACH FL 33411** CITY-ST-ZIP Change Addition Delete TITLE TITLE BRUNET, SANDRA NAME NAME 2741 PARKER AVE, UNIT B STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33405 CITY-ST-ZIP [] Change Addition TITLE ☐ Delete TITLE PEGUERO, CARLOS NAME 2389-3 GREENGATE CIR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33415 ☐ Change - Addition ☐ Delete TITLE AVILA, RAMON NAME STREET ADDRESS 241 SANDPIPER AVE STREET ADDRESS **ROYAL PALM BEACH FL 33411** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

(561) 863-320

14/2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR