

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000092208

**Entity Name:** A PERFECT CUT TREE SERVICE, INC

**Current Principal Place of Business:**

261 19TH ST SW  
NAPLES, FL 34117

**Current Mailing Address:**

261 19TH ST SW  
NAPLES, FL 34117

**FEI Number:** 20-1245221

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SANTOS, ADELA L  
261 19TH ST SW  
NAPLES, FL 34117 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            P  
Name            SANTOS, ADELA L  
Address        261 19TH ST SW  
City-State-Zip: NAPLES FL 34117

*I hereby 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 all other like empowered.*

**SIGNATURE:** ADELA SANTOS

P

05/01/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date