

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000122683

**Entity Name:** PERFORMING CUTS, LLC

**Current Principal Place of Business:**

22635 SW 64TH WAY  
BOCA RATON, FL 33428

**Current Mailing Address:**

P. O. BOX 970185  
BOCA RATON, FL 33497 US

**FEI Number:** 46-3552265

**Certificate of Status Desired:** No

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

PALMER, STEPHEN T  
4755 TECHNOLOGY WAY  
102  
BOCA RATON, FL 33431 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

**Authorized Person(s) Detail :**

Title	MGRM
Name	GUTTY, JID A
Address	22635 SW 64TH WAY
City-State-Zip:	BOCA RATON FL 33428

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** JID GUTTY

MGRM

04/30/2014

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date