

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Monahan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H36139** (4)

1. Corporation Name
ALL STAR CABINETS, INC.



Principal Place of Business
**% RICHARD LEE BAKAN
3724 HEATHER LAKE CIR
SARASOTA FL 34235**

Mailing Address
**% RICHARD LEE BAKAN
3724 HEATHER LAKE CIR
SARASOTA FL 34235**

2. Principal Place of Business
21 **1131 SNEAD AVE**
Suite, Apt. #, etc.
22
City & State
23 **SARASOTA, FL**
Zip
24 **34237** Country
25 **U.S.A.**

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

9. Name and Address of Current Registered Agent

**BAKAN, RICHARD LEE
3724 HEATHER LAKE CIR
SARASOTA FL 34235**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent (available if applicable)

(607.1. Required Agent signature and address on this form)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PDT	☐ DELETE
NAME	BAKAN, RICHARD L.	
STREET ADDRESS	3724 HEATHER LAKE CIR	
CITY-STATE-ZIP	SARASOTA FL	
TITLE	V	☐ DELETE
NAME	BAKEN, ROBERTA K	
STREET ADDRESS	3723 HEATHER LAKE CIR	
CITY-STATE-ZIP	SARASOTA FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(d), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Richard L. BAKAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-29-96

941-955-4968

CR2E034 (12/95)