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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H36139

 Corporation 	n Name	•			
ALL STA	r Cabinets, Inc.			Ì	
				S LANGERIA DI DE RIVERA DELLA RELIGIO DE RIVERA DE RIVERA	ALAKI DIBIK BEBEH BIDIK BEBUK IBBE
Principal Place	e of Business	Mailing Address		1 (88181) 8188 11110 81101 11100 11110 1811 01011	#1#11 #1# 11 #1#11 #1#11 #1#11 1##1
1131 SNEAD A		% RICHARD LEE BAKAN			
SARASOTA FL		3724 HEATHER LAKE CIRLO	Œ		
US SARASOTA FL 34235				DO NOT WRITE IN THIS	3 SPACE
				3. Date Incorporated or Qualifed	,
				12/17/1984	
Principal Place of Business 2a. Mailing Address			4. FEI Number	Applied For	
21		26	 	59-2486585	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22		27			
City & State	е	City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees
23	Country	Zip	Country	Trust Fund Contribution	
Zip			30	This corporation owes the current year In Personal Property Tax.	☐Yes ☐No
24	9, Name and Address of Curren		30]	10. Name and Address of New Registered	
	9, Name and Address of Curren	it registered Agent	81 Name	10. 112110 0112 11221000 011110 11221000	
BAK	AN, RICHARD LEE			· · · · · · · · · · · · · · · · · · ·	
3724 HEATHER LAKE CIR		82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
SARASOTA FL 34235			83		
			84 City	FI	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named cor				•	-
office or r	egistered agent or both, in the State	of Florida. Such change was au	ithorized by the corpora	ition's board of directors. I hereby accept the appo	intment as registered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Flori	ida Statutes.		
SIGNATURE	Signature, typed or printed name of registered age	est and title if applicable (NOTE:	Registered Agent signature requ	ired when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PDT	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BAKAN, RICHARD L.		: 1.2 NAME		
STREET ADDRESS	3724 HEATHER LAKE CIR		1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP		
TITLE	٧	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BAKEN, ROBERTA K		2.2 NAME		
STREET ADDRESS	3723 HEATHER LAKE CIR		2.3 STREET ADDRESS		·
CITY-ST-ZIP	SARASOTA FL		2.4 CITY-ST-ZIP	· ·	í,
TITLE	Orano mil	☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		Ì
CITY-ST-ZIP			3 4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME.			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS	•	
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY- ST-ZIP		
TITLE	<u> </u>	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		}
STREET ADDRESS			6.3 STREET ADDRESS		
			_ (

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: