

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J46937

Entity Name: UNIQUE CABINETRY, INC.

FILED
Jun 30, 2004
Secretary of State

Current Principal Place of Business:

4180 116TH TERRACE N
CLEARWATER, FL 33762 US

New Principal Place of Business:

Current Mailing Address:

4180 116TH TERRACE N
CLEARWATER, FL 33762 US

New Mailing Address:

FEI Number: 59-2749271

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CULLEM, JOHN P., ESQ.
856 2ND AVE N
ST PETERSBURG, FL 33701

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SAMS, KENTON A.,
Address: 12400 LAGOON LANE
City-St-Zip: TREASURE ISLAND, FL 33706

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD () Change (X) Addition
Name: PILCHER, KEN
Address: 121 104TH AVENUE #10
City-St-Zip: TREASURE ISLAND, FL 33706

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: KENTON SAMS

PD

06/30/2004

Electronic Signature of Signing Officer or Director

Date