


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 16, 2006 8:00 am
Secretary of State

06-16-2006 90103 011 ***150.00

DOCUMENT # P04000069555			
1. Entity Name DBL KITCHEN CABINET CORP.			
Principal Place of Business 3238 N.W. 41 ST. MIAMI, FL 33142		Mailing Address 3238 N.W. 41 ST. MIAMI, FL 33142	
2. Principal Place of Business 1402 SW 118 AVE.		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State MIAMI, FL.		City & State	
Zip 33184	Country	Zip	Country
6. Name and Address of Current Registered Agent ALDAO, MAXIMO L 3238 N.W. 41 ST. MIAMI, FL 33142		7. Name and Address of New Registered Agent Name: MAXIMO L. ALDAO Street Address (P.O. Box Number is Not Acceptable): 1402 SW 118 AVE. City: MIAMI FL Zip Code: 33184	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <i>Maximo Aldao</i> DATE: 06/13/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD ALDAO, MAXIMO L 3238 N.W. 41 ST. MIAMI, FL 33142 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD ALDAO, MAXIMO L. 1402 SW 118 AVE, MIAMI, FL. 33184 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered.			
SIGNATURE: <i>Maximo Aldao</i>		MAXIMO ALDAO 06/13/06	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	