2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: 2

FILED May 02, 2005 8:00 am Secretary of State

05-02-2005 90474 027 ***150 00

4.27.5

Date

7862186316

| DOCUMENT # P0400089701 1. Entity Name PREMIER KITCHEN & HOME DESIGNS, INC. | | | | | | | | | 05-02-20 | 05 904/4 | 02/ ***150 |).00 |
|--|---|---------------------------------------|-----------------|---|--------------|--|---|--------------------------|---------------------------------------|-----------------|---------------------------|---------------|
| Principal Place of Business 17711 SW 4TH COURT PEMBROKE PINES, FL 33029 | | | | Mailing Address 17711 SW 4TH COURT PEMBROKE PINES, FL 33029 | | | · | | ,(44, | | | |
| 2. Principal Place of Business | | | | 3. Mailing Address | | | | | | | | |
| Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | 04272005 | 6 Chg-P | CR2E | E034 (10/03) | |
| City & State | | | | City & State | | | • | 4. FEI Num | 2465 | 722 | | plied For |
| Zip | Country | | | Zip Count | | | | | te of Status Desir | | \$8.75 Add Fee Require | litional d |
| 6. Name and Address of Current R | | | | legistered Agent | | | 7. Name and Address of New Registered Agent | | | | | |
| | | | | | | Name | | | | | | |
| FAMULARI, F. DAVID ESQ. 5730 SW 74 STREET, SUITE 700 MIAMI, FL 33143 | | | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
|] | | | | | | City | | | | F | Zip Cod | е |
| The above named entity submits this statement for the purpose of changing its registers | | | | | | | | | | _ | L | |
| the obligat | named entit ions of regist | y submits this stateme lered agent | nt for the p | ourpose of changing its | register | ed office o | r register | ed agent, or b | ooth, in the State | of Florida. Tar | m familiar with, | and accept |
| | | .o. oo agama | | | | | | | | | | |
| SIGNATURE_ | | | | | | | | | | | | |
| | Signature, typed | or printed name of registered a | agent and title | if applicable. (NOT | E. Registere | d Agent signat | ture required | when reinstating) | · · · · · · · · · · · · · · · · · · · | DATE | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution. | | | | | | | \$5 . Add | .00 May Be ed to Fees | | | • | |
| 10. | OFFICERS AND DIRECTORS 11. | | | | | | | ADDITION | S/CHANGES TO | OFFICERS AN | ND DIRECTOR | S IN 11 |
| TITLE | Delete TITL | | | | | E | P | / / / | / . | | Change | ☐ Addition |
| NAME | MONTIEL, BOUGLAS A | | | | | E | MON | itiez, L | DOUGIAS W. 415 PINES | A | • • | |
| STREET ADDRESS | 1 | | | | | ET ADDRESS | 177 | 11 5. | w. 40 | er. | ~ ~ . | |
| CITY-ST-ZIP . | | | | | | | PEN | 1BROKE | PINES | F6. | 330. | 29 |
| TITLE | V | | | Delete | TITL | E | 1 | | | | Change | ☐ Addition |
| NAME | FALCON, ADRIANA E | | | | | | | | | | | |
| STREET ADDRESS CITY-ST-ZIP | | | | | | ET ADDRESS | | | | | | |
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| TITLE NAME | | | | Delete Delete | TITU | | | | | | Change | Addition |
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| NAME | | | | _ 5500 | NAM | | İ | | | | C Ontarige | ☐ voorton |
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| TITLE NAME | | | | ☐ Delete | TITL | | | | | | Change | Addition |
| STREET ADDRESS | | | | | NAM | | | | | | | |
| CITY-ST-ZIP | | | | | | et address -st-zip | | | | | | |
| | artifu that IL | n information | | | | | <u> </u> | | | | | |
| 12. 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 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 pither like empowered. | | | | | | | | | | | | |