

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000006023

FILED
Mar 17, 2009
Secretary of State

Entity Name: AZZARO CUSTOM CABINETRY, INC.

Current Principal Place of Business:

4271 ALTHEA WAY
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

4053 ILEX CIR. N
PALM BEACH GARDENS, FL 33410 US

Current Mailing Address:

4271 ALTHEA WAY
PALM BEACH GARDENS, FL 33410

New Mailing Address:

4053 ILEX CIR. N
PALM BEACH GARDENS, FL 33410 US

FEI Number: 65-1072718

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AZZARO, MIKE
4271 ALTHEA WAY
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

AZZARO, MIKE
4053 ILEX CIR. N
PALM BEACH GARDENS, FL 33410 US

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:

03/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: AZZARO, MICHAEL
Address: 4271 ALTHEA WAY
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: VD () Delete
Name: AZZARO, STACY
Address: 4271 ALTHEA WAY
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: AZZARO, MICHAEL
Address: 4053 ILEX CIR. N
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: VD (X) Change () Addition
Name: AZZARO, STACY
Address: 4053 ILEX CIR. N
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MICHAEL A. AZZARO

PSD

03/17/2009

Electronic Signature of Signing Officer or Director

Date