

## **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P94000032087

**Entity Name:** FUSION CABINETS, INC.

**FILED**  
**Dec 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

7842 126TH AVENUE NORTH  
UNIT 7A  
LARGO, FL 33773

**New Principal Place of Business:**

**Current Mailing Address:**

7842 126TH AVENUE NORTH  
UNIT 7A  
LARGO, FL 33773

**New Mailing Address:**

**FEI Number:** 59-3243286

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HYSNI, PETE  
1844 MARY'S MEADOW LN  
PALM HARBOR, FL 34683 US

**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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HYSNI, PETE  
Address: 1844 MARY'S MEADOW LN  
City-St-Zip: PALM HARBOR, FL 34683

Title: V  
Name: MANZINI, MICHELLE  
Address: 1844 MARY'S MEADOW LANE  
City-St-Zip: PALM HARBOR, FL 34683

I hereby 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 all other like empowered.

SIGNATURE: PETE HYSNI

P

12/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date