## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Feb 13, 2008 08:00 Al tate

				7	(	Sacratary of	C4
DOCUMENT # 555604  1. Entity Name WEST GATE CABINET & MILLWORK, INC.						Secretary of	SI
Principal Plac	e of Business	Mailing Address		1			
862 W. 13TI		862 W. 13TH CT.		-			
KIVIEKA BEA	NCH, FL 33404	RIVIERA BEACH, FL 33404		1			
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· n	O NOT WRITE	IN THIS SPA	CE			Applied For	<del></del>
			`.	4. FEI Numb 59-178		Not Applica	
· · · · · · · · · · · · · · · · · · ·			, ,		of Status Desired	\$8.75 Additional	
	6. Name and Address of Current Re	ristored Aront		1		Fee Required	
	o. Nume and Address of Corrent No	Sistered Affect	1				
	S. EDWIN J.	1.	DO	NOT W	RITE		
862 W. 13TH COURT RIVIERA BEACH, FL 33404			ľ		•	• •	
			· .	IN	THIS SP	ACE	
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	named entity submits this statement for the	ne purpose of changing its registe	red office or register	red agent, or bo	th, in the State of Flo	rida. I am familiar with, and acce	əpt
irie obligat	tions of registered agent.						
SIGNATURE.	Signature, typed or printed name of registered agent and	htle if apolicable (NOTE Registe	red Agent signature required	1 when reinstating)		DATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Etection Campaign Fina Trust Fund Contribution		.00 May Be led to Fees	•		
10.	OFFICERS AND DI	RECTORS	4				
TITLE NAME	P WIDDOWS, JAY R		•				
STREET ADDRESS	3267 GONDOLIER WAY	Ī		Hoopo	loor and		
CITY-SI-ZIP	LANTANA, FL		_		000000 	)825491	
TITLE NAME	ST WIDDOWS, EDWIN J		1		"ori rii "oo	onorth ofth (190.00)	
STREET ADDRESS	3267 DIAMOND HEAD RD				and the second		
CITY-ST-ZIP	LANTANA, FL			* ", *	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	and a sum of the second	. '
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NAME							,
STREET ADDRESS				. 5			

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 an other like empowered

CITY-ST-ZIP

SIGNATURE:

ATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR