2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F06245

1. Entity Name GESNER CABINETS, INC.



Mailing Address

Principal Place of Business 3932 WILSHIRE ST. LAKE PARK, FL 33403

SIGNATURE

3932 WILSHIRE ST. LAKE PARK, FL 33403

FILED Mar 29, 2006 8:00 am Secretary of State

03-29-2006 90113 007 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For 4. FEI Number 65-0146764 Not Applicable \$8.75 Additional

5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent GESNER, ROBERT

DO NOT WRITE 3932 WILSHIRE ST. LAKE PARK, FL 33403 IN THIS SPACE

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.	

(NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing

\$5.00 May Be

(FILE:NOW!!! FEE:IS:\$150.00") After:May:1,72006'Fee:will:be:\$550.00 \Box Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE GESNER, ROBERT NAME STREET ADDRESS 3932 WILSHIRE ST. LAKE PARK, FL CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-\$T-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 like empowered.

SIGNATURE:

Jes n TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #