

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F54180

FILED
Apr 14, 2005
Secretary of State

Entity Name: CARY'S KITCHEN CABINETS INC.

Current Principal Place of Business:

2795 W 78 ST.
HIALEAH, FL 33016

New Principal Place of Business:

Current Mailing Address:

2795 W 78 ST.
HIALEAH, FL 33016

New Mailing Address:

FEI Number: 59-2172446

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERIDA, HIGINIO
2795 W. 78 ST.
HIALEAH, FL 33016 US

Name and Address of New Registered Agent:

CARY M. RODRIGUEZ
2795 W. 78 ST.
HIALEAH, FL 33016 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: CARY M. RODRIGUEZ

04/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VTD () Delete
Name: MERIDA, JORGE A.
Address: 9928 N.W. 133 ST. HIALEAH
City-St-Zip: GARDEN, FL 33016

Title: PSD () Delete
Name: MERIDA, HIGINIO
Address: 8200 NW 166 TERR.
City-St-Zip: MIAMI LAKES, FL 33016

Title: M () Delete
Name: RODRIGUEZ, CARY M.
Address: 8201 NW 169 TERR.
City-St-Zip: MIAMI LAKES, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VTD (X) Change () Addition
Name: MERIDA, JORGE A.
Address: 9928 N.W. 133 ST. HIALEAH
City-St-Zip: GARDEN, FL 33016

Title: PSD (X) Change () Addition
Name: MERIDA, HIGINIO
Address: 7801 NW 160 TERR
City-St-Zip: MIAMI LAKES, FL 33016

Title: MD (X) Change () Addition
Name: RODRIGUEZ, CARY M.
Address: 8201 NW 169 TERR.
City-St-Zip: MIAMI LAKES, FL 33016

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CARY M. RODRIGUEZ

MD

04/14/2005

Electronic Signature of Signing Officer or Director

Date