## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G08144

Name:

Address:

City-St-Zip:

WULF, TRACY M

9815 PINEAPPLE TREE DR #206

BOYNTON BEACH, FL 33436 US

Entity Name: WULF CABINET WORKS, INC.

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place	New Principal Place of Business:	
1314 NEPT SUITE 1	UNE DRIVE					
	BEACH, FL	33426				
Current Mailing Address:				New Mailing Address	New Mailing Address:	
1314 NEPT SUITE 1	UNE DRIVE					
	BEACH, FL	33426				
FEI Number:	59-2235422	FEI Num	nber Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address o	Name and Address of New Registered Agent:	
12165 COF	SSELL D VP RDIA DRIVE BEACH, FL	33437	US			
The above in the State		submits th	nis statement for the pu	urpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:					
Electronic Signature of Registered Agent				nt	Date	
Election Carr	npaign Financir	ng Trust Fun	nd Contribution ( ).			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VP ( WULF, RUSSI 12165 CORDI BOYNTON BE	A DRIVE	437 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PTD ( WULF, SUSAN 12165 CORDI BOYNTON BE	A DRIVE	437 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title:	S ()	K) Delete		Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: RUSSELL D. WULF VP 04/27/2006