

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H30548

Entity Name: FRED'S CABINETS, INC.

FILED
Jan 21, 2004
Secretary of State

Current Principal Place of Business:

JAY ROBINSON
530 NE 42ND CT #4
OAKLAND PARK, FL 33334 US

Current Mailing Address:

JAY ROBINSON
530 NE 42ND CT #4
OAKLAND PARK, FL 33334 US

FEI Number: 59-2372234

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAY ROBINSON
530-N.E. 42 CT. #4
OAKLAND PARK, FL 33334 US

New Principal Place of Business:

HASAN ORAN
530 NE 42ND CT
OAKLAND PARK, FL 33334 US

New Mailing Address:

HASAN ORAN
530 NE 42ND CT
OAKLAND PARK, FL 33334 US

Name and Address of New Registered Agent:

HASAN ORAN
530 NE 42ND CT
OAKLAND PARK, FL 33334 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: HASAN ORAN

01/21/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVPT () Delete
Name: ROBINSON, JAY S.,
Address: 530 NE 42ND CT #4
City-St-Zip: OAKLAND PARK, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVPT (X) Change () Addition
Name: HASAN, ORAN
Address: 530 NE 42ND CT
City-St-Zip: OAKLAND PARK, FL 33334

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: HASAN ORAN

OWNE

01/21/2004

Electronic Signature of Signing Officer or Director

Date