SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

26

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

101

CREATIVE CABINETRY, INC	(3) :		II ATAN AMAR ANAN ANAN ARAW ANAN
Principal Place of Business 13599 63RD LANE NORTH	Mailing Address 13698 63RD LANE NORTH	DO NOT WRITE IN THIS SPACE	
WEST PALM BEACH FL 33412 US	WEST PALM BEACH FL 33412 US		
		3. Date Incorporated or Qualified 02/19/1987	3a. Date of Last Report 08/21/1996
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied

Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WERSCHING, LOUIS R. 13698 63RD LANE N. 82 Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33412 83 84 City Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered

office or re agent. I ar	egistered agent, or both, in the State of F m familiar with, and accept the obligation	lorida. Such change was au is of, Section 607.0505, Flor	ithorized by the corpolida Statutes.	ration's board of directors. I hereby accept the appointment as re	gistered		
SIGNATURE					ļ		
	Signature, typed of printed name of registered agent and		Registered Agent signature ret	<u> </u>			
12.	OFFICERS AND DIRECTORS		13,		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DPT	☐ DELETE	1.1 TITLE	☐ Change	Addition		
NAME	WERSCHING, LOUIS R.		1.2 NAME				
STREET ADORESS	13698 63RD LN., NORTH		1.3 STREFT ADDRESS				
CITY-ST-ZIP	WEST PALM BEACH FL		1.4 CITY - ST - ZIP				
TITLE	DSV	DELETE	21 TITLE	☐ Change	Addition		
NAME	WERSCHING, GRACE		2 2 NAME				
STREET ADDRESS	13698 63RD LN., NORTH		2.3 STREET ADDRESS		i		
CITY-ST-ZIP	WEST PALM BEACH FL		2. 4 CITY - ST - ZIP		l		
TITLE		☐ DELEYE	3.1 TITLE	Change	Addition		
NAME			3.2 NAME		Ì		
STREET ADDRESS			3.3 STREFT ADDRESS		i		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		ł		
TITLE		DELETE	4.1 TITLE	☐ Change	Addition		
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		DELETE	5.1 TITLE	Change [Addition		
NAME			5.2 NAME				
STREET ADDRESS			5 3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY - ST- ZIP				
TITLE		DELETE	6.1 TITLF	☐ Change	Addition		
NAME			6.2 NAME				
STREET ADDRESS	•		6.3 STREET ADDRESS				

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

65-0189729

FILED

Aug 18 1997 8:00am

Secretary of State

Applied For

Not Applicable