## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# K34816

City-St-Zip:

Entity Name: SHOWCASE CUSTOM CABINETS, INC.

FILED Feb 07, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 8787 SW 131 ST. 10445 SW 184 TERR MIAMI, FL 33176 MIAMI, FL 33157 **Current Mailing Address: New Mailing Address:** 10445 SW 184 TERR 8787 SW 131 ST. MIAMI, FL 33176 MIAMI, FL 33157 FEI Number: 65-0081240 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PETERSON, WADE C 234 NORTH KROME AVENUE HOMESTEAD, FL 33130 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition CLEMENTS, THOMAS, Name: Name: 9195 SW 115 TERR. Address: Address: City-St-Zip: MIAMI, FL City-St-Zip: Title: VΡ Title: () Change () Addition ( ) Delete Name: WISE, GARFIELD Name: 13850 SW 268 ST, APT 102, BLD#15 Address: Address: HOMESTEAD, FL 33032

City-St-Zip:

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.

SIGNATURE: THOMAS CLEMENTS **PRES** 02/07/2006