2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Feb 27, 2006 8:00 am **Secretary of State** DOCUMENT # K59227 1. Entity Name 02-27-2006 90084 033 \*\*\*150.00 CABINETS BY BOOTH INC. Mailing Address Principal Place of Business 6953 SONNY DALE DRIVE 6953 SONNY DALE DRIVE SUITE C SUITE C W. MELBOURNE FL 32904 W. MELBOURNE FL 32904 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) Applied For City & State 4. FEI Number City & State 59-2924317 Not Applicable Country \$8.75 Additional Zio Country Zip 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BOUTIN, STEVEN C 6953 SONNY: DALE DRIVE Sonny SUITE C WEST MELBOURNE FL 32904 8. The above named entify submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Change 🔀 Addition TITLE TITLE ☐ Delete GREGRICH, ROBERT T. NAME NAME STREET ADDRESS STREET ADDRESS 131 BRIARWOOD LANE CITY-ST-ZIP CITY-ST-ZIP COCOA FL ☐ Addition Change Delete TITLE NAME BOUTIN, STEVEN C NAME STREET ADDRESS 1886 PARRSBORO ST. NW STREET ADDRESS CITY-ST-ZIP CITY-ST-7IE PALM BAY FL Change Addition TITLE ☐ Delete NAME NAME BARTH, ROBERT ST STREET ADDRESS STREET ADDRESS 767 BALLARD DRIVE CITY-ST-ZIP CITY-ST-ZIP MELBOURNE FL TIT! F ☐ Change Addition Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. Robard 3 BAKAh 2-14-06 SIGNATURE: