

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90408 023 *****50.00

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L01000014003	
1. Entity Name C.P.G. CUSTOM CABINETS, L.C.	
	
Principal Place of Business 1115A 53RD COURT SOUTH MANGONIA PARK, FL 33407	Mailing Address 1115A 53RD COURT SOUTH MANGONIA PARK, FL 33407
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country
Zip	Country
4. FEI Number ☒ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent ENTERPRISE BUSINESS CONSULTANTS, CORP 149 W. PALMETO PARK RD STE 452 BOCA RATON, FL 33498	
7. Name and Address of New Registered Agent Name Oscar Perez Street Address (P.O. Box Number is Not Acceptable) 2053 Vinigan Circle apt 522 City Wellington FL Zip Code 33414	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Oscar Perez DATE 04-18-03	
9. MANAGING MEMBERS / MANAGERS	
10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
MGR PEREZ, OSCAR ARTURO 2053 VINIGANS CIRCLE APT 522 WELLINGTON, FL 33414	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
MGR ESPERANZA CASTRO, DIANA 2053 VINIGANS CIRCLE APT 522 WELLINGTON, FL 33414	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 606, Florida Statutes. SIGNATURE: Oscar Perez DATE: 04-18-03 8480010	