2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 29, 2005 08:00 AM Secretary of State

Daytime Phone #

| DOCUMENT # L030000 1. Entity Name CABINET STUDIO, LLC | 006756 | |
|--|--|--|
| Principal Place of Business— 5311 E. COUNTY HWY. 30A SANTA ROSA BEACH, FL 32459 US | Mailing Address PO BOX 2549 SANTA ROSA BEACH, FL 32459 | us |
| - | | |
| DO NOT WRITE IN THIS SPACE | | 04212005No Chg-LLC CR2E083 (10/03) |
| | | 4. FEI Number Applied For 83-0349728 Not Applicable |
| | | 5. Certificate of Status Desired Fee Required |
| 6. Name and Address of Cui | rent Registered Agent | |
| SMITH, K. MICHELLE 136 TIMBER COURT DESTIN, FL 32541 | | DO NOT WRITE |
| | | IN THIS SPACE |
| | | - comment of the comm |
| 8. The above named entity submits this statement the obligations of registered agent. | ent for the purpose of changing its registered off | ice or registered agent, or both, in the State of Florida. I am familiar with, and accept |
| SIGNATURE | - · · · · · · · · · · · · · · · · · · · | |
| Signature, typed or printed name of registered | agent and title if applicable. (NOTE Registered Agent | signature required when reinstating) DATE. |
| Filing Fee is \$50.00 Due by May 1, 2005 | | 000000341512 04/29/05-80017-024 50.00 |
| 9. MANAGING ME | MBERS/MANAGERS | ======================================= |
| NAME MILLER, JERRY STREET ADDRESS 2166 WEST C-30A, STE E | | |
| CITY-ST-ZIP SANTA ROSA BEACH, FL | 32459 | |
| TITLE NAME | | } |
| STREET ADDRESS CITY-ST-ZIP | | } |
| TITLE | | |
| NAME STREET ADDRESS | | DO NOT WRITE |
| CITY-SI-ZIP | | IN THIS SPACE |
| NAME STREET ADDRESS | | IN THIS SPACE |
| CITY-ST-ZIP | | |
| TITLE NAME (| | |
| STREET ADDRESS CITY-ST-ZIP | | |
| TITLE | | |
| NAME STREET ADDRESS | f | |
| CITY-ST-ZIP 11. I hereby certify that the information supplied | d with this filling does not qualify for the exemption | n stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information |
| indicated on this report is true and accurate limited liability company or the receiver or tr | and that my signature shall have the same legar rustee empowered to execute this report as requ | in stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of the street as if made under oath; that I am a managing member or manager of the street by Chapter 608, Florida Statutes. |
| SIGNATURE: | 1/// | 4/27/2005 850-622-1550 |
| | ME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REP | |