2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 25, 2007
Secretary of State

DOCUMENT# L05000004839

Entity Name: D.H. CUSTOM CABINETS, LLC

Current Principal Place of Business:

2800 NW 74TH PLACE
SUITE E
GAINESVILLE, FL 32653 US

New Principal Place of Business:

Current Mailing Address:

2800 NW 74TH PLACE
SUITE E
GAINESVILLE, FL 32653 US

New Mailing Address:

FEI Number: 20-2304172 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HERNANDEZ, OLMEDO D
2291 NW 145TH DRIVE
NEWBERRY, FL 32669 US

Name and Address of New Registered Agent:

HERNANDEZ, OLMEDO D
2220 SW 110TH TERRACE
GAINESVILLE, FL 32607 US

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: 01/25/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: HERNANDEZ, OLMEDO D
Address: 2291 NW 145TH DRIVE
City-St-Zip: NEWBERRY, FL 32669 US

Title: MGRM ( ) Delete
Name: VALDEZ, ANA D
Address: 2291 NW 145TH DRIVE
City-St-Zip: NEWBERRY, FL 32669 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: HERNANDEZ, OLMEDO D
Address: 2220 SW 110TH TERRACE
City-St-Zip: GAINESVILLE, FL 32607 US

Title: MGRM (X) Change ( ) Addition
Name: VALDEZ, ANA D
Address: 2220 SW 110TH TERRACE
City-St-Zip: GAINESVILLE, FL 32607 US

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 is true and accurate and that my electronic 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 608, Florida Statutes.

SIGNATURE: OLMEDO D. HERNANDEZ MGR 01/25/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date