

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000006851

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: AFFORDABLE CABINETS LLC

**Current Principal Place of Business:**

1090 INNOVATION  
#109  
NORTH PORT, FL 34289

**New Principal Place of Business:**

**Current Mailing Address:**

8402 COSGROVE RD  
NORTH PORT, FL 34286

**New Mailing Address:**

564 URBANA RD  
VENICE, FL 34293

FEI Number: 74-3164112

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

OROS, DAVID  
5580 KISMET TER  
NORTH PORT, FL 34287 US

**Name and Address of New Registered Agent:**

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: LEON, SERGE  
Address: 8402 COSGROVE RD  
City-St-Zip: NORTH PORT, FL 34286

Title: MGR ( ) Delete  
Name: OROS, DAVID  
Address: 1090 INNOVATION  
City-St-Zip: NORTH PORT, FL 34289

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: LEON, SERGE  
Address: 564 URBANA RD  
City-St-Zip: VENICE, FL 34293

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DAVID OROS

MGR

04/30/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date