2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000019091

Entity Name: PAGE'S CABINETS, L.L.C.

FILED Apr 26, 2008 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

455 S PINE ISLAND RD, APT. 305 455 S PINE ISLAND RD 305

PLANTATION, FL 33324

PLANTATION, FL 33324

Current Mailing Address: New Mailing Address:

455 S PINE ISLAND RD, APT. 305 455 S PINE ISLAND RD PLANTATION, FL 33324

305 PLANTATION, FL 33324

FEI Number: 74-3217485 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PEREZ, BELKYS PEREZ, BELKYS 455 S PINE ISLAND RD 455 S PINE ISLAND RD, APT. 305

PLANTATION, FL 33324 US 305 PLANTATION, FL 33324 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: 04/26/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Change () Addition () Delete

GONZALEZ, GODOFREDO Name: Name: Address: 455 S PINE ISLAND RD, APT. 305 Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

Name: PEREZ, BELKYS Name: Address: 455 S PINE ISLAND RD, APT, 305 Address: City-St-Zip: PLANTATION, FL 33324 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: BELKYS PEREZ 04/26/2008