

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000062089

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** SOUTHWEST FLORIDA CABINETS, LLC

**Current Principal Place of Business:**

211 SE 13TH AVE  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

**Current Mailing Address:**

211 SE 13TH AVE  
CAPE CORAL, FL 33990

**New Mailing Address:**

**FEI Number:** 27-3195862

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DEL ROSARIO, JOSEPH  
211 SE 13TH AVE  
CAPE CORAL, FL 33990 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:** MGRM  
**Name:** DEL ROSARIO, JOSEPH  
**Address:** 211 SE 13TH AVE.  
**City-St-Zip:** CAPE CORAL, FL 33990

**Title:** MGRM  
**Name:** DEL ROSARIO, MIRIAM  
**Address:** 211 SE 13TH AVE  
**City-St-Zip:** CAPE CORAL, FL 33990

**Title:** MGRM  
**Name:** DEL ROSARIO, ELIZABETH  
**Address:** 211 SE 13TH AVE.  
**City-St-Zip:** CAPE CORAL, FL 33990

**Title:** MGR  
**Name:** CORDONES, LEANDRO  
**Address:** 217 SE 7TH STREET  
**City-St-Zip:** CAPE CORAL, FL 33990

I hereby 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:** JOSEPH DEL ROSARIO

MGRM

04/29/2011

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