

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000071482

Entity Name: SUPREME CABINETS, INC.

FILED
Mar 17, 2006
Secretary of State

Current Principal Place of Business:

4193 OLDFIELD CROSSING DR
STE 2
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

4193 OLDFIELD CROSSING DR
STE 2
JACKSONVILLE, FL 32223

New Mailing Address:

PO BOX 57487
JACKSONVILLE, FL 322417487

FEI Number: 59-3660727

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REKAU, MICHAEL J
4193 OLDFIELD CROSSING DR
STE 2
JACKSONVILLE, FL 32223 US

Name and Address of New Registered Agent:

HERNANDEZ, MEREDITH A
3617 CROWN POINT ROAD
STE 10
JACKSONVILLE, FL 32257 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: MEREDITH ALLEN HERNANDEZ

03/17/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: REKAU, MICHAEL J
Address: 4193 OLD FIELD CROSSING DR STE 2
City-St-Zip: JACKSONVILLE, FL 32258

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL REKAU

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03/17/2006

Electronic Signature of Signing Officer or Director

Date