

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000024907

FILED
Apr 29, 2008
Secretary of State

Entity Name: DONAVIN CABINET COMPONENTS, INC.

Current Principal Place of Business:

914 SE 9TH ST
UNIT - B
CAPE CORAL, FL 33990

New Principal Place of Business:

3818 SKYLINE BLVD
UNIT - 3
CAPE CORAL, FL 33914

Current Mailing Address:

914 SE 9TH ST
UNIT - B
CAPE CORAL, FL 33990

New Mailing Address:

3818 SKYLINE BLVD
UNIT - 3
CAPE CORAL, FL 33914

FEI Number: 65-1094803

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEOLA, VINCENT JR
2903 NW 17TH TERR
CAPE CORAL, FL 33993 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: MEOLA, VINCENT JR
Address: 2903 NW 17TH TERR
City-St-Zip: CAPE CORAL, FL 33993

Title: DVS () Delete
Name: MEOLA, DONNA M
Address: 2903 NW 17TH TERR
City-St-Zip: CAPE CORAL, FL 33993

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: VINCENT MEOLA, JR

PRES

04/29/2008

Electronic Signature of Signing Officer or Director

Date