2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2011
Secretary of State

DOCUMENT# P01000060731

Entity Name: MASTERPIECE CABINETRY, INC.

Current Principal Place of Business:

MASTERPICE CABINETRY INC
686 S. YONGE STREET
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

MASTERPICE CABINETRY INC
200 GREENBRIAR AVE
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 59-3746061 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VOLINSKY, ROBERT J
200 GREENBRIAR AVENUE
ORMOND BEACH, FL 32174 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

OFFICERS AND DIRECTORS:

Title: PD
Name: VOLINSKY, ROBERT J
Address: 200 GREENBRIAR AVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: VPD
Name: VOLINSKY, KELLY C
Address: 200 GREENBRIAR AVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: SD
Name: ROBERT, VOLINSKY J
Address: 200 GREENBRIAR AVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: TD
Name: VOLINSKY, KELLY C
Address: 200 GREENBRIAR AVE
City-St-Zip: ORMOND BEACH, FL 32174

I hereby 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 all other like empowered.

SIGNATURE: ROBERT J VOLINSKY P 04/13/2011

Electronic Signature of Signing Officer or Director — Date