



2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2004 8:00 am
Secretary of State

02-02-2004 90043 016 ***150.00

DOCUMENT # P02000011694 1. Entity Name SUNSET CABINETS, INC.					
Principal Place of Business 1731 EMERALD COVE CIRCLE CAPE CORAL, FL 33991			Mailing Address 1731 EMERALD COVE CIRCLE CAPE CORAL, FL 33991		
2. Principal Place of Business 1741 EMERALD COVE CIR. Suite, Apt. #, etc.		3. Mailing Address 1741 EMERALD COVE CIR. Suite, Apt. #, etc.		% F , - - 2 5 0 F &	
City & State CAPE CORAL FL		City & State CAPE CORAL FL		4. FEI Number 03-0409691	
Zip 33991		Country LEE		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CIPOLLA, SALAVATORE JR 1731 EMERALD COVE CIRCLE CAPE CORAL, FL 33991				7. Name and Address of New Registered Agent Name CIPOLLA SALVATORE JR Street Address (P.O. Box Number is Not Acceptable) 1741 EMERALD COVE CIRCLE City CAPE CORAL FL Zip Code 33991	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004, Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CIPOLLA, SALAVATORE JR 1731 EMERALD COVE CIRCLE CAPE CORAL, FL 33991	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SALVATORE CIPOLLA JR 1741 EMERALD COVE CIRCLE CAPE CORAL FL 33991	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD CIPOLLA, BETH B 1731 EMERALD COVE CIRCLE CAPE CORAL, FL 33991	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD CIPOLLA, BETH B 1741 EMERALD COVE CIRCLE CAPE CORAL FL 33991	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: X 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date Jan 29 2004 (239) 980-0297 Daytime Phone #					