

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000021536

FILED
Feb 20, 2004
Secretary of State

Entity Name: E.C. CABINETS INSTALLATION, INC.

Current Principal Place of Business:

1840 N.E. 186 STREET
#1-F
NORTH MIAMI BEACH, FL 33179

New Principal Place of Business:

Current Mailing Address:

1840 N.E. 186 STREET
#1-F
NORTH MIAMI BEACH, FL 33179

New Mailing Address:

FEI Number: 01-0712542 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSARIO, YUDELKA
1840 N.E. 186 STREET
#1-F
NORTH MIAMI BEACH, FL 33179

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: PSD () Delete
Name: CRUZ, EMILIO
Address: 1840 N.E. 186 STREET #1-F
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: VTD () Delete
Name: ROSARIO, YUDELKA
Address: 1840 N.E. 186 STREET #1-F
City-St-Zip: NORTH MIAMI BEACH, FL 33179

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 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 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: EMILIO CRUZ

PSD

02/20/2004

Electronic Signature of Signing Officer or Director

Date