2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000023584

Entity Name: KITCHENS PLUS, INC.

FILED Apr 09, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
AASA OLIADE AVENUE	

1154 SHADE AVENUE BUILDING 36 UNIT 111 SARASOTA, FL 34237

Current Mailing Address: New Mailing Address:

1154 SHADE AVENUE BUILDING 36 UNIT 111 SARASOTA, FL 34237

FEI Number: 02-0554880 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TERDSLAVICH, JOSEPH 2375 WOOD STREET SARASOTA, FL 34239 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD () Delete Title: (X) Change () Addition TERDOSLAVICH, JOSEPH T TERDOSLAVICH, JOSEPH T Name: Name: 2375 WOOD STREET 2375 WOOD STREET Address: Address: City-St-Zip: SARASOTA, FL 34237 City-St-Zip: SARASOTA, FL 34237

Title: PTD () Delete Title: VPSD (X) Change () Addition Name: TERAOSLAVICH, JOSEPH Name: PARKER, DAVID M

 Name:
 TERAOSLAVICH, JOSEPH
 Name:
 PARKER, DAVID M

 Address:
 2375 WOOD STREET
 Address:
 2319 HIVELY STREET

 City-St-Zip:
 SARASOTA, FL 34239
 City-St-Zip:
 SARASOTA, FL 34231

Title: S (X) Delete Title: () Change () Addition

 Name:
 AGULAR, ALÀN
 Name:

 Address:
 3627 YORK DRIVE
 Address:

 City-St-Zip:
 BRADENTON, FL 34205
 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: JOSEPH TERDOSLAVICH PD 04/09/2004