## **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

## Mar 14, 2008 8:00 am Secretary of State **DOCUMENT # P02000054039** 03-14-2008 90039 029 \*\*\*150 00 1. Entity Name KITCHEN & BATH DESIGNERS, INC. Principal Place of Business Mailing Address 924 SW 67TH AVENUE 924 SW 67TH AVENUE MIAMI, FL 33144: MIAMI, FL 33144 03102008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 01-0693364 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent. CASTILLO, ELIO A DO NOT WRITE 924 SW 67TH AVENUE MIAMI, FL 33144 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWIII, FEE IS \$150.00 ...Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PSTD TITLE -CASTILLO, ELIO A NAME STREET ADDRESS 924 SW 67TH AVE CITY-ST-ZIP MIAMI, FL 33144 NAME STREET ADDRESS CITY-ST-ZIP NAME... STREET ADDRESS: DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

**FILED** 

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

TITLE NAME STREET ADDRESS CITY-ST-ZIP