2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# P02000105595

Entity Name: SMART SOLUTIONS KITCHEN CABINETS, INC.

Current Principal Place of Business:

9900 NW 79 AVE
HIALEAH, FL 33010

New Principal Place of Business:

11115 W OKEECHOBEE RD
135
HIALEAH GARDENS, FL 33018

Current Mailing Address:

9900 NW 79 AVE
HIALEAH, FL 33010

New Mailing Address:

11115 W OKEECHOBEE RD
135
HIALEAH GARDENS, FL 33018

FEI Number: 76-0715199 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALVAREZ, JUSTO
9900 NW 79 AVE
HIALEAH, FL 33016 US

Name and Address of New Registered Agent:

ALVAREZ, JUSTO
11115 W OKEECHOBEE RD
135
HIALEAH GARDENS, FL 33018 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: JUSTO ALVAREZ 03/27/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTS ( ) Delete
Name: ALVAREZ, JUSTO
Address: 9900 NW 79 AVE
City-St-Zip: HIALEAH, FL 33016

Title: VP ( ) Delete
Name: ALVAREZ, ANA M
Address: 9900 NW 79 AVE
City-St-Zip: HIALEAH, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change ( ) Addition
Name: ALVAREZ, JUSTO
Address: 11115 W OKEECHOBEE RD #135
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: VP (X) Change ( ) Addition
Name: ALVAREZ, ANA M
Address: 11115 W OKEECHOBEE RD #135
City-St-Zip: HIALEAH GARDENS, FL 33018

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JUSTO ALVAREZ P 03/27/2009
Electronic Signature of Signing Officer or Director Date