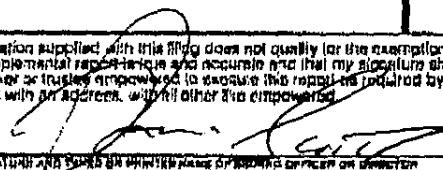


FILED

Jul 25, 2005 08:00 AM
Secretary of State2005 FOR PROFIT CORPORATION-
ANNUAL REPORT

DOCUMENT # P02000106891			
1. Entity Name CREATION CABINETRY AND INSTALLATION, INC.			
Principal Place of Business 4315 STONEFIELD DR ORLANDO, FL 32826		Mailing Address 4315 STONEFIELD DR ORLANDO, FL 32826	
DO NOT WRITE IN THIS SPACE		07202005 No Chg-P CR2E034 (10/03)	
		4. FEI Number 78-0715434	
		Applied For [Not Applicable]	
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SCOTT, KEVIN 4315 STONEFIELD DR ORLANDO, FL 32826		DO NOT WRITE 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 Signature, typed or printed name of registered agent and the if applicable		(NOTE: Registered Agent Signature (required) please complete!!)	
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
		In accordance with s. 807.103(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			
TITLE	D		
NAME	SCOTT, KEVIN		
STREET ADDRESS	4315 STONEFIELD DR		
CITY-ST-ZIP	ORLANDO FL 32826		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 170.073(3)(b), Florida Statutes, regarding the information indicated on this report or supplemental report-inquire and ascertain and that my signature shall have the same legal effect as if made under oath by any officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes, and that my name appears on Block 11 or Block 11 if changed, or on an attachment with an agreement, with all other the empowered.			
SIGNATURE: 		7/20/05	
MANUAL AND PENCIL OR PRINTED NAME OF PERSON OFFICER OR DIRECTOR		Date	

000000374299
07/25/05-80003-021 150.00DO NOT WRITE
IN THIS SPACESIGN
& DATE