

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 12, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000049725</b>	
1. Entity Name FIRST IMPRESSION DOORS & MILLWORK INC.	

Principal Place of Business 8211 BAMA LANE UNIT 2 WEST PALM BEACH, FL 33411 US	Mailing Address 8211 BAMA LANE UNIT 2 WEST PALM BEACH, FL 33411 US
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**DO NOT WRITE IN THIS SPACE**



01092007 No Chg-P CR2E034 (11/05)

4. FEI Number 11-3693461	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

RIASKI, BRENDAN  
 8211 BAMA LANE  
 UNIT 2  
 WEST PALM BEACH, FL 33411

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees

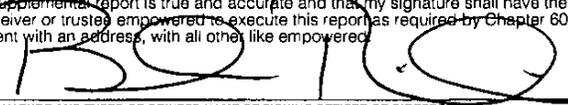
**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RIASKI, BRENDAN 16112 EAST ALAN BLACK BLVD. LOXAHATCHEE, FL 33470
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DOBKINS, DARREN 1269 MYSTIC WAY WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 01/12/07-80046-020 150.00

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.

**SIGNATURE:**  **1-9-07 (561) 798-6684**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Brendan Riaski