2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Mar 17, 2006 08:00 AM **DOCUMENT # P03000086136 Secretary of State** 1. Entity Name JAMES P. DOSIS CABINETRY, INC. Mailing Address Principal Place of Business 133 SE 12TH ST. 133 SE 12TH ST. CAPE CORAL, FL 33990 CAPE CORAL, FL 33990 CR2E034 (11/05) 02242006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 55-0841751 \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DOSIS, JAMES P 133 SE 12TH ST. CAPE CORAL, FL 33990 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. d name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE DOSIS, JAMES P MARKE STREET ADDRESS 133 SE 12TH ST. CITY-ST-ZIP CAPE CORAL, FL 33990 TITLE MARKET STREET ADDRESS C114-51-ZIP TITLE NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 cath; that I am an officer or direction of the corporation or the receiver or fursive empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

James P. Dosis, President

FILED