2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2004
Secretary of State

DOCUMENT# P03000095046

Entity Name: MOUNTAINLAND CABINETS & WOODWORKS, INC.

Current Principal Place of Business:

5360 MALAMIN RD
N PORT, FL 34287

New Principal Place of Business:

2842 TAMIAMI TRAIL
SUITE #B
PORT CHARLOTTE, FL 33952

Current Mailing Address:

5360 MALAMIN RD
N PORT, FL 34287

New Mailing Address:

2842 TAMIAMI TRAIL
SUITE #B
PORT CHARLOTTE, FL 33952

FEI Number: 57-1184803 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: LAMB, WADE C
Address: 5360 MALAMIN RD
City-St-Zip: N PORT, FL 34287

Title: VD ( ) Delete
Name: LAMB, JAMES A
Address: 5360 MALAMIN RD
City-St-Zip: N PORT, FL 34287

Title: S ( ) Delete
Name: JACKMAN, ROBERT S
Address: 5360 MALAMIN RD
City-St-Zip: N PORT, FL 34287

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WADE C. LAMB PTD 05/10/2004

Electronic Signature of Signing Officer or Director — Date