

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000114061

Entity Name: WELL HUNG CABINETS INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

ROUTE 16 BOX 38699
LAKE CITY, FL 32055

New Principal Place of Business:

253 NW NATASHA GLEN
LAKE CITY, FL 32055

Current Mailing Address:

ROUTE 16 BOX 38699
LAKE CITY, FL 32055

New Mailing Address:

253 NW NATASHA GLEN
LAKE CITY, FL 32055

FEI Number: 20-0382615

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: TOMLINSON, BILLY
Address: ROUTE 16 BOX 38699
City-St-Zip: LAKE CITY, FL 32055

Title: V () Delete
Name: LEVESQUE, BARRIE
Address: ROUTE 16, BOX 38699
City-St-Zip: LAKE CITY, FL 32055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: TOMLINSON, BILLY
Address: 253 NW NATASHA GLEN
City-St-Zip: LAKE CITY, FL 32055

Title: V (X) Change () Addition
Name: LEVESQUE, BARRIE
Address: 253 NW NATASHA GLEN
City-St-Zip: LAKE CITY, FL 32055

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: BILLY TOMLINSON

PSTD

04/29/2005

Electronic Signature of Signing Officer or Director

Date