2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: Dand Section Rice Paul Barton on SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR STREET OR

FILED Mar 04, 2005 08:00 AM Secretary of State

DOCUMENT # P03000138979 1. Entity Name KITCHENS CABINETS & MORE, INC.			Secretary of S			
5834 NORD		Mailing Address 5834 NORDE DR. WEST JACKSONVILLE, FL 32244		L CREATIVANT FOR ANGELE HINT SERVIC SERVIC NESTRE HINTE CREAT HERE	lf (20)	
C	O NOT WRITE I		CE	03022005 No Chg-P CR2E034 (10/03) 4. FEI Number		
BARTON, PAUL A 5834 NORDE DR. WEST JACKSONVILLE, FL 32244				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 title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				5.00 May Be		
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIR PD BARTON, PAUL A 5834 NORDE DR. WEST JACKSONVILLE, FL 32244	ECTORS		U00000251457 03/04/05-80051-018 150.0	00	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		W. Marine				
indicated of the con	on this report or supplemental report is true	filing does not qualify for the exen and accurate and that my signated to execute this report as require	ure shall have the s	section 119.07(3)(i), Florida Statutes. I further certify that the inform a same legal effect as if made under oath; that I am an officer or d or, Florida Statutes; and that my name appears in Block 10 or Block.	irector I	