

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000142662

FILED  
Apr 23, 2008  
Secretary of State

Entity Name: HANDY ANDY CABINET INSTALLER INC

## Current Principal Place of Business:

1874 GATEWOOD DR  
DELTONA, FL 32738 US

## New Principal Place of Business:

157 NORTH INDUSTRIAL DRIVE  
ORANGE CITY, FL 32763 US

## Current Mailing Address:

1874 GATEWOOD DR  
DELTONA, FL 32738 US

## New Mailing Address:

FEI Number: 41-2125591      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PAEZ, ADDINSEL  
1874 GATEWOOD DR  
DELTONA, FL 32738 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: P ( ) Delete  
Name: PAEZ, ADDINSEL  
Address: 1874 GATEWOOD DR  
City-St-Zip: DELTONA, FL 32738

Title: O ( ) Delete  
Name: PAEZ, MISRAIN  
Address: 1874 GATEWOOD DRIVE  
City-St-Zip: DELTONA, FL 32738

Title: O ( ) Delete  
Name: CARMENATE, MARCELO  
Address: 1874 GATEWOOD DRIVE  
City-St-Zip: DELTONA, FL 32738

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: O (X) Change ( ) Addition  
Name: VAZQUEZ, JESSICA  
Address: 1874 GATEWOOD DRIVE  
City-St-Zip: DELTONA, FL 32738

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ADDINSEL PAEZ

P

04/23/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date