2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF

SIGNATURE:

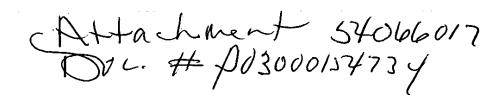
Aug 02, 2004 8:00 am Secretary of State DOCUMENT # P03000154734 1. Entity Name 08-02-2004 90006 034 ***150.00 FLETCHER CABINET INSTALLERS, INC. Principal Place of Business Mailing Address 6036 FIREFLY DR 6036 FIREFLY DR PENSACOLA FL 32507 PENSACOLA FL 32507 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 200521149 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FLETCHER, EDWARD Street Address (P.O. Box Number is Not Acceptable) 6036 FIREFLY DR PENSACOLA FL 32507 City Zip Code 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. **PST** TITLE ☐ Delete TITLE ☐ Change Addition NAME FLETCHER, EDWARD NAME STREET ADDRESS 6036 FIREFLY DR STREET ADDRESS CITY-ST-ZIP PENSACOLA FL 32507 CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition - MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if

Edward

Daytime Phone #

IG OFFICER OR DIRECTOR

FILED



27 July 2004

Division of Corporations Annual Report Section P.O. Box 6850 Tallahassee, FL 32314

Dear Division of Corporations Representative,

I am writing you to explain the reason why I am sending you this Profit Report Form late.

Your office sent me a card to apply for a Profit Report Form several months ago (before May 1st). I mailed that card back to you the same day that I received it. The card said to "allow 10-14 days" for delivery of the Profit Report Form. I never received it.

In late June, your office sent me a Notice of Intent to Dissolve/Application for a Profit Report Form again. I mailed it back to you right away. I received a Profit Report Form a couple of weeks ago. However, it stated that I owed a \$400 late fee for not filing the form before May 1st.

This is my first year as a corporation in Florida. I did not know about the deadline or the \$400 late fee because I wasn't sent the Profit Report Form until July. If I had received a Report Form before May 1st, I would have filed it in a timely manner.

Therefore, I called and spoke to one of your Customer Service Representatives, who recommended that I send in a letter explaining my situation/circumstances and request that you waive the \$400 late fee.

I am enclosing a check for the \$150 fee and asking for your consideration to waive the \$400 late fee.

Thank you,

Edward Fletcher

SECTION 1

Edward Hetcher

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