

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000060747

FILED
Apr 07, 2006
Secretary of State

Entity Name: CABINET INSTALLATIONS INC.

Current Principal Place of Business:

6791 S SOLO TERRACE
HOMOSASSA, FL 34446 US

New Principal Place of Business:

Current Mailing Address:

6791 S SOLO TERRACE
HOMOSASSA, FL 34446 US

New Mailing Address:

FEI Number: 65-1223671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENJAMIN, DANIEL
6791 S SOLO TERRACE
HOMOSASSA, FL 34446 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: PRES () Delete
Name: BENJAMIN, DANIEL
Address: 6791 S SOLO TERRACE
City-St-Zip: HOMOSASSA, FL 34446 US

Title: VP () Delete
Name: MORRISON, LEE
Address: 120 BAYSHORE DR
City-St-Zip: CRYSTAL RIVER, FL 34429

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: DANIEL BENJAMIN

PRES

04/07/2006

Electronic Signature of Signing Officer or Director

Date