

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000080454

1. Entity Name
M.J. KITCHEN CABINETS CORP.



Principal Place of Business
612 W 28 ST
HIALEAH, FL 33010

Mailing Address
612 W 28 ST
HIALEAH, FL 33010



02022006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1154905

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

DOMINGUEZ, MARTIN
11439 NW 51 LANE
MIAMI, FL 33178

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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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE P
NAME DOMINGUEZ, MARTIN
STREET ADDRESS 11439 NW 51 LANE
CITY-ST-ZIP MIAMI, FL 33178

TITLE ST
NAME SANTANA, JONATAN
STREET ADDRESS 1333 W 49 PLACE
CITY-ST-ZIP HIALEAH, FL 33012

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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02/18/06-80049-007 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Martin Dominguez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/3/2006

Date

Daytime Phone #