

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000097481

**FILED**  
**May 08, 2012**  
**Secretary of State**

**Entity Name:** CABINET CREATIONS OF MELBOURNE, INC.

**Current Principal Place of Business:**

360 STAN DR.  
SUITE C  
MELBOURNE, FL 32904

**New Principal Place of Business:**

7715 ELLIS RD  
MELBOURNE, FL 32904

**Current Mailing Address:**

360 STAN DR.  
SUITE C  
MELBOURNE, FL 32904

**New Mailing Address:**

7715 ELLIS RD  
MELBOURNE, FL 32904

**FEI Number:** 87-0728958

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HILL ACCOUNTING AND TAX SERVICE  
314 LAURIE ST.  
MELBOURNE, FL 32935 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

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: CIZEK, ROBERT F JR  
Address: 7715 ELLIS RD.  
City-St-Zip: MELBOURNE, FL 32904

Title: P  
Name: CIZEK, KATHLEEN  
Address: 7715 ELLIS RD.  
City-St-Zip: MELBOURNE, FL 32904

I hereby 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 all other like empowered.

SIGNATURE: KATHLEEN CIZEK

P

05/08/2012

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

\_\_\_\_\_  
Date