2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000137369

Address:

City-St-Zip:

ROYAL PALM BEACH, FL 33411

Entity Name: ACCENT CABINETS INC.

FILED Mar 29, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3420 45TH STREET REAR 3A WEST PALM BEACH, FL 33407 **New Mailing Address: Current Mailing Address: 3420 45TH STREET** REAR 3A WEST PALM BEACH, FL 33407 FEI Number: 20-1698787 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RAMIREZ, RUBEN 3420 45TH STREET REAR -3A WEST PALM BEACH, FL 33407 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DP () Delete Title: () Change () Addition RAMIREZ, RUBEN Name: Name: 16112 EAST WILTSHIRE DR Address: Address: City-St-Zip: LOXAHATCHEE, FL 33470 City-St-Zip: Title: D,VP () Delete Title: () Change () Addition Name: GOMEZ, VICTOR Name: 12179 59TH STREET NORTH Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RUBEN RAMIREZ PD 03/29/2005