2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2005
Secretary of State

DOCUMENT# P04000147720

Entity Name: ESI CUSTOM CABINETRY INC.

Current Principal Place of Business:

9561 LAVILL LANE
WINDERMERE, FL 34786 US

New Principal Place of Business:

610 HICKMAN CIRCLE
SUITE D
SANFORD, FL 32771 US

Current Mailing Address:

9561 LAVILL LANE
WINDERMERE, FL 34786 US

New Mailing Address:

610 HICKMAN CIRCLE
SUITE D
SANFORD, FL 32771 US

FEI Number: 20-1727038 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JOSEPH, YOUNES
9561 LAVILL LANE
WINDERMERE, FL 34786 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: P, D ( ) Delete
Name: YOUNES, JOSEPH
Address: 9561 LAVILL LANE
City-St-Zip: WINDERMERE, FL 34786 US

Title: VP ( ) Delete
Name: SODERSTROM, WILLIAM
Address: 1450 METZ AVENUE
City-St-Zip: SSANFORD, FL 32771 US

Title: S ( ) Delete
Name: ALLMAN, GORDON
Address: 474 WOODSTOCK DRIVE
City-St-Zip: PORT ORANGE, FL 32127 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 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: GORDON ALLMAN S 03/03/2005
Electronic Signature of Signing Officer or Director Date