2006 FOR PROFIT CORPORATION ANNUAL REPORT

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Aug 21, 2006 8:00 am
Secretary of State
08-21-2006 90005 033 ***158.75

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08152006 Chg-P CR2E034 (11/05)

DOCUMENT # P04000160526

1. Entity Name
5 K'S CABINET DESIGN INC.

Principal Place of Business	Mailing Address
2262 ARBOUR WALK CIRCLE #1613 NAPLES, FL 34109	2262 ARBOUR WALK CIRCLE #1613 NAPLES, FL 34109

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 34-2029898 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

TEBBE, CATHERINE A
8660 WEIR DRIVE #208
NAPLES, FL 34104

7. Name and Address of New Registered Agent

Name TEBBE, CATHERINE A
Street Address (P.O. Box Number is Not Acceptable) 2262 ARBOUR WALK CIRCLE #1613
City NAPLES FL Zip Code 34109

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 Catherine A. Tebbe 8/15/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $550.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P TEBBE, CATHERINE A 8660 WEIR DRIVE #208 NAPLES, FL 34104	☐ Delete	P TEBBE, CATHERINE 2262 ARBOUR WALK CIRCLE #1613 NAPLES, FL. 34109	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

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: Catherine A. Tebbe 8/15/06 239 298 9624
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT
500257764

5 K'S CABINET DESIGN INC. AUGUST 15, 2006

CATHERINE A TEBBE
2262 ARBOUR WALK CIRCLE # 1613
FLORIDA, FL. 34104

239-298-9624
DOCUMENT # P04000160526

TO WHOM IT MAY CONCERN:

WHEN I CHANGED MY ADDRESS LAST YEAR, THE BUSINESS ADDRESS WAS CHANGED CORRECTLY BUT NOT THE REGISTERED AGENTS. AS A RESULT I DID NOT RECEIVE NOTICE OF THE ENCLOSED FORM FOR FEES DUE.

I KINDLY ASK IF YOU COULD PLEASE WAVE THE LATE FEE.

THANKING YOU IN ADVANCE.

SINCERELY,

Catherine A. Tebbe

CATHERINE A. TEBBE