

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000048210

Entity Name: EURO CABINET DOOR, INC.

FILED
Apr 04, 2007
Secretary of State

Current Principal Place of Business:

20533 BISCAYNE BLVD SUITE N 144
AVENTURA, FL 33180

New Principal Place of Business:

1440 CORAL RIDGE DR
CORAL SPRINGS, FL 33071

Current Mailing Address:

20533 BISCAYNE BLVD SUITE N 144
AVENTURA, FL 33180

New Mailing Address:

1440 CORAL RIDGE DR
CORAL SPRINGS, FL 33071

FEI Number: 74-3143481

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARPMAN, IRVING
20533 BISCAYNE BLVD SUITE N 144
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

AHARON, USIEL
10955 NW 21ST PLACE
CORAL SPRINGS, FL 33071 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: USIEL AHARON

04/04/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEVIN, MICHAEL
Address: 20533 BISCAYNE BLVD SUITE N 144
City-St-Zip: AVENTURA, FL 33180

Title: ST (X) Delete
Name: CARPMAN, IRVING
Address: 20533 BISCAYNE BLVD SUITE N 144
City-St-Zip: AVENTURA, FL 33180

Title: D (X) Delete
Name: AHA, VZI
Address: 20533 BISCAYNE BLVD SUITE N 144
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: AHARON, USIEL
Address: 10955 NW 21ST PLACE
City-St-Zip: CORAL SPRINGS, FL 33071

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 Chapter 119, 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: USIEL AHARON

P

04/04/2007

Electronic Signature of Signing Officer or Director

Date