## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000056501

Name:

Address:

City-St-Zip:

MIKKOLA, MICHEL K

724 4TH AVENUE SOUTH, #9

ST. PETERSBURG, FL 33701

Entity Name: SOUTHERN ELITE CABINETRY OF GEORGIA, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
544 PINELLAS BAYWAY S. #203				602 CONNOLE ST. BRUNSWICK, GA 31525 US			
	ERDE, FL 33	3715		DICOIOVVI	ON, OA 31320	, 00	
Current Mailing Address:				New Mailing Address:			
544 PINEL #203	LAS BAYWA	YS.					
	ERDE, FL 33	3715					
FEI Number:	20-2757612	FEI Number Applied Fe	or ( ) FEI Nu	mber Not App	licable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
#203 TIERRA VI The above	LAS BAYWA ERDE, FL 33 named entity e of Florida.	3715 US	for the purpose of	of changing i	ts registered o	ffice or registered agent, or both,	
SIGNATUR	RE:						
Electronic Signature of Registered Agent				Date			
Election Car	npaign Financi	ng Trust Fund Contribution	ı (  ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	P ( EDWARDS, V 313 CASA MA SANFORD, FI	RINA PLACE		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	LANDER, JOH	S BAYWAY S., #203		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title:	S, T (	) Delete		Title:	TRES (X)	Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Name:

Address:

City-St-Zip:

MIKKOLA, MICHEL K

SANFORD, FL 32771

401 W. 20TH ST.

SIGNATURE: JOHN A. LANDER VP 04/29/2008