

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000122815

Entity Name: DOLPHIN CABINETS, INC.

FILED  
Aug 14, 2008  
Secretary of State

## Current Principal Place of Business:

18440 NE 20 PL  
NORTH MIAMI BEACH, FL 33179

## New Principal Place of Business:

## Current Mailing Address:

7545 E TREASURE DR - # 6E  
N BAY VILLAGE, FL 33141

## New Mailing Address:

18440 NE 20 PL  
NORTH MIAMI BEACH, FL 33179

FEI Number: 20-3421096

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DELFIN, MARCELO T  
7545 E TREASURE DR - # 6E  
N BAY VILLAGE, FL 33141 US

## Name and Address of New Registered Agent:

DELFIN, MARCELO T  
18440 NE 20 PLACE  
NORTH MIAMI BEACH, FL 33179 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: MARCELO DELFIN

08/14/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: DELFIN, MARCELO T  
Address: 18440 NE 20 PL  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: VP ( ) Delete  
Name: FUENTES, LISTICIA  
Address: 18440 NE 20 PL  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: MARCELO DELFIN

PRES

08/14/2008

Electronic Signature of Signing Officer or Director

Date