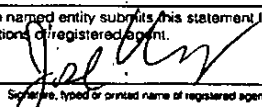
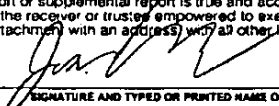


FILED
Apr 06, 2006 8:00 am
Secretary of State

03-23-2006 90015 031 ***150.00

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P05000154552			
1. Entity Name BATH AND KITCHEN DESIGNS, INC.			
Principal Place of Business 36348 KEYSTONE AVE. ZEPHYRHILLS, FL 33541		Mailing Address 36348 KEYSTONE AVE. ZEPHYRHILLS, FL 33541	
2. Principal Place of Business 38732 Otis Allen Rd		3. Mailing Address PO BOX 986	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Zephyrhills FL		City & State Zephyrhills FL	
Zip 33540		Zip 33539-0986	
Country		Country	
4. FEI Number 20-3814078		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VASQUEZ, JOSEPH A JR. 36348 KEYSTONE AVE. ZEPHYRHILLS, FL 33541		7. Name and Address of New Registered Agent Name Joseph A. Vasquez Jr. Street Address (P.O. Box Number is Not Acceptable) 38732 Otis Allen Rd City Zephyrhills FL Zip Code 33540	
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 		DATE	
Signature, typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when reinstating)	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		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 PRES NAME VASQUEZ, JOSEPH A JR. STREET ADDRESS 36348 KEYSTONE AVE. CITY-ST-ZIP ZEPHYRHILLS, FL 33541 ☐ Delete		TITLE President NAME Joseph A Vasquez Jr. STREET ADDRESS 38732 Otis Allen Rd CITY-ST-ZIP Zephyrhills FL 33540 ☒ Change ☐ Addition	
TITLE VP NAME VASQUEZ, JOSEPH A JR. STREET ADDRESS 36348 KEYSTONE AVE. CITY-ST-ZIP ZEPHYRHILLS, FL 33541 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE SEC NAME VASQUEZ, JOSEPH A JR. STREET ADDRESS 36348 KEYSTONE AVE. CITY-ST-ZIP ZEPHYRHILLS, FL 33541 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE TREA NAME VASQUEZ, JOSEPH A JR. STREET ADDRESS 36348 KEYSTONE AVE. CITY-ST-ZIP ZEPHYRHILLS, FL 33541 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE VP NAME VASQUEZ, MICHELLE STREET ADDRESS 36348 KEYSTONE AVE. CITY-ST-ZIP ZEPHYRHILLS, FL 33541 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ 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: 		3/20/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	