## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000104678

Entity Name: APHIS MILLWORK & CABINETRY INC.

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

1919 NW 19 STREET SUITE 625

FT. LAUDERDALE, FL 33311

Current Mailing Address: New Mailing Address:

1919 NW 19 STREET SUITE 625

FT. LAUDERDALE, FL 33311

FEI Number: 20-5361192 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GEYMONET, JUAN
1919 NW 19 STREET
1919 NW 19 STREET
1919 NW 19 STREET

SUITE 625 SUITE 625

FT. LAUDERDALE, FL 33311 US FT. LAUDERDALE, FL 33311 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: JUAN GEYMONAT 04/26/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD () Delete Title: PSD (X) Change () Addition

Name: GEYMONET, JUAN Name: GEYMONAT, JUAN

 Address:
 1919 NW 19 STREET SUITE 625
 Address:
 1919 NW 19 STREET SUITE 625

 City-St-Zip:
 FT. LAUDERDALE, FL 33311
 City-St-Zip:
 FT. LAUDERDALE, FL 33311

Title: VPTD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BOUZA, JORGE L
 Name:

 Address:
 1919 NW 19 STREET SUITE 625
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL 33311
 City-St-Zip:

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GOLDBERG, IRWIN L
 Name:

 Address:
 1919 NW 19 STREET SUITE 625
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL 33311
 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: JORGE L. BOUZA VPTD 04/26/2007