

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000139892

FILED
Apr 28, 2008
Secretary of State

Entity Name: BATTLES-GARCIA CABINETRY INC

Current Principal Place of Business:

250 EAST 18TH ST
HIALEAH, FL 33010

New Principal Place of Business:

Current Mailing Address:

250 EAST 18TH ST
HIALEAH, FL 33010

New Mailing Address:

FEI Number: 20-5853547

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, CHRISTINA
250 E 18TH ST
HIALEAH, FL 330103145 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GARCIA, CRISTINA A
Address: 355 W 20TH ST #302
City-St-Zip: MIAMI, FL 33010

Title: VD () Delete
Name: BATLLES, ANDRES JR.
Address: 250 EAST 18TH ST
City-St-Zip: HIALEAH, FL 33010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GARCIA, CHRISTINA A
Address: 355 W 20TH ST #302
City-St-Zip: MIAMI, FL 33010

Title: V (X) Change () Addition
Name: BATLLES, ANDRES JR.
Address: 250 EAST 18TH ST
City-St-Zip: HIALEAH, FL 33010

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: CHRISTINA A GARCIA

P

04/28/2008

Electronic Signature of Signing Officer or Director

Date