

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000149125

FILED  
Jun 07, 2007  
Secretary of State

Entity Name: MARANATHA ANGELO CABINET, CORP

## Current Principal Place of Business:

10104 NW 80 AVE  
HIALEAH GARDENS, FL 33016

## New Principal Place of Business:

12248 NW 106 CT BAY 6  
MEDLEY, FL 33178

## Current Mailing Address:

10104 NW 80 AVE  
HIALEAH GARDENS, FL 33016

## New Mailing Address:

12248 NW 106 CT BAY 6  
MEDLEY, FL 33178

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COBENA, EDINSSON U  
4827 NW 82 AVE  
LAUDERHILL, FL 33351 US

## Name and Address of New Registered Agent:

COBENA, EDINSSON U  
11310 NW 31 ST  
SUNRISE, FL 33323 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:

06/07/2007

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: P ( ) Delete  
Name: COBENA, EDINSSON U  
Address: 4827 NW 82 AVE  
City-St-Zip: LAUDERHILL, FL 33351

Title: V ( ) Delete  
Name: MATURANA, OSCAR S  
Address: 10104 NW 80 AVE  
City-St-Zip: HIALEAH GARDENS, FL 33016

Title: T ( ) Delete  
Name: MATURANA, MERLY K  
Address: 10104 NW 80 AVE  
City-St-Zip: HIALEAH GARDENS, FL 33016

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: COBENA, EDINSSON U  
Address: 11310 NW 31 ST  
City-St-Zip: SUNRISE, FL 33323

Title: V (X) Change ( ) Addition  
Name: MATURANA, OSCAR S  
Address: 12248 NW 106 CT BAY 6  
City-St-Zip: MEDLEY, FL 33178

Title: T (X) Change ( ) Addition  
Name: MATURANA, MERLY K  
Address: 12248 NW 106 CT BAY 6  
City-St-Zip: MEDLEY, FL 33178

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: EDINSSON

P

06/07/2007

Electronic Signature of Signing Officer or Director

Date