2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000067762

Name:

Address:

City-St-Zip:

RIGAU, DANIEL

18728 N.W. 14TH ST.

PEMBROKE PINES, FL 33029 US

FILED May 01, 2009 Secretary of State

| Entity Name: CABINET SERVICE GROUP, CORP. | | | | | |
|---|--|---|--|--------------------------------------|--|
| Current Principal Place of Business: | | | New Principal Place of Business: | | |
| 18728 N.W PEMBROK | 7. 14TH ST. E PINES, FL 33029 | US | | | |
| Current Mailing Address: | | | New Mailing Address | New Mailing Address: | |
| 18728 N.W PEMBROK | 7. 14TH ST. E PINES, FL 33029 | US | PO BOX 824826 PEMBROKE PINES, FI | _ 33082 US | |
| FEI Number: | 90-0411725 FEI Nu | umber Applied For() FEI N | lumber Not Applicable() | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of New Registered Agent: | | |
| RIGAU, RIG 18728 N.W PEMBROK | | US | RIGAU, RICARDO OV 18728 N.W. 14TH ST. PEMBROKE PINES, FI | | |
| The above in the State | | this statement for the purpose | e of changing its registered | office or registered agent, or both, | |
| SIGNATURE: RICARDO RIGAU | | | | 05/01/2009 | |
| | Electronic Signa | ature of Registered Agent | | Date | |
| | e with s. 607.193(2)(b), F paign Financing Trust F | S., the corporation did not receive und Contribution (). | e the prior notice. | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | P, D () Delete RIGAU, RICARDO 18728 N.W. 14TH ST. PEMBROKE PINES, FL | 33029 US | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: Address: City-St-Zip: | S, T () Delete RIGAU, RICARDO 18728 N.W. 14TH ST. PEMBROKE PINES, FL | 33029 US | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title [.] | D () Delete | | Title [.] | () Change () Addition | |

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.

Name:

Address:

City-St-Zip:

SIGNATURE: RICARDO RIGAU P.D 05/01/2009