

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000003148 (2)**

1. Corporation Name

OCEAN KITCHEN CABINETS, CORP.



Principal Place of Business

**3660 N.W. 76TH ST.
MIAMI FL 33147**

Mailing Address

**3660 N.W. 76TH ST.
MIAMI FL 33147**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

3. Date Incorporated or Qualified

01/14/1993

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0459735

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

**HERNANDEZ, HILDA
5010 N.W. 198TH ST.
MIAMI FL 33055**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (Individual, Firm, Trust or Agent for the Trust)

Signature of Registered Agent (Individual or Firm)

DATE

12. OFFICERS AND DIRECTORS

TITLE DELETE

NAME **PD HERNANDEZ, HILDA**

STREET ADDRESS **5010 N.W. 198TH ST.**

CITY - ST - ZIP **MIAMI FL 33055**

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE Change Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

2. TITLE Change Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

3. TITLE Change Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

4. TITLE Change Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

5. TITLE Change Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

6. TITLE Change Addition

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Hilda Hernandez*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)