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PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P93000042134	(5)

	er Kitchen Cabinets, I	INC.		 	)   <b>111</b> 1/1 <b>11</b> 1/1 <b>11</b> 1/1 121/1 111/1 1121/1 1121/1 1121/1
Principal Place	of Business	Mailing Address			
2526 W STA DELAND FL	NTE ROAD 44 32721	P O BOX 1089 N/A Deland Fl 32720 Us			
		00		3. Date Incorporated or Q	Jualified 3a. Date of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address		06/08/1993	01/19/1995
21		26. Mailing Address		4. FEI Number	Applied F
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		59-3192093	Not Appl
22		27		5. Certificate of Status Do.	sired [] \$8.75 Addition
City & State	)	City & State		6. Election Campaign Fina	
Zip	Country	28		Trust Fund Contribution	Added to Fee
3272		<sup>Z<sub>ip</sub></sup> 32721	Country 30	8. This corporation has lial	bility for intangible tax under s 199.032
	9. Name and Address of Curr		1301	Florida Statutes  10, Name and Address o	Yes No
			<b>81</b> Nam		r reur negistered Agent
	IALD, THOMAS		82 Stree	(DO Fig. Market)	
	YOU CIRCLE		62 Stree	et Address (P.O. Box Number is Not A	oceptable)
DEBARY	FL 32713		83		
			84 City		
11 Durawant to	4		""		FL 85 Zip Code
or registere familiar with	o the provisions of Sections 607.05 and agent, or both, in the State of Fic h, and accept the obligations of, Se	02 and 607.1508, Florida Statu orida. Such change was authori oction 607.0505. Florida Statute	ites, the above-named zed by the corporation	corporation submits this statement for 's board of directors. I hereby accept t	r the purpose of changing its registered the appointment as registered agent.
			S.		The second secon
SIGNATURE _			S.	,	, , and a sign of a sign of the sign of th
SIGNATURE	Signature, typed or printed name of registered age	ent and title it applicable IN	S. OTE: Registered Agent signatur		DATE
SIGNATURE S	OFFICERS A	ent and title if applicable (N ND DIRECTORS	OTE: Flogistered Agent signatur	to required when reinstating): ADDITIONS/CHANGES	
SIGNATURE	OFFICERS A	ent and title it applicable IN	OTE: Registered Agent signatur  13. 1.1 TITLE	u required when reinstaing:  ADDITIONS/CHANGES	DATE  TO OFFICERS AND DIRECTORS IN 12  TO Change
SIGNATURE	OFFICERS A S MCDONALD, SANDRA	ent and title if applicable (N ND DIRECTORS	OTE: Registered Agent signatur  13.  1.1 TITLE  1.2 NAME	u required when reinstaing:  ADDITIONS/CHANGES	DATE  TO OFFICERS AND DIRECTORS IN 12  TO Change
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SIGNATURE: Sandra Month Sandra Signature and typed on printed name of signing officer on director

Sandra McDonald

4/30/46 Date

9W-73Y-198Y