## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION** FOR



## FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS



**DOCUMENT #** 

1. Corporation Name

P95000023583

CABINET SAVERS, INC. SEC						LAHASSEE, FLORIDA				
Principal Prace of Business Mailing Address										
13762 S.W. 68TH STREET MIAMI FL 33183			<del>-</del>	13762 S.W. 68TH STREET MIAMI FL 33183						
		ncorrect in any way. Im ddress, II Applicable		information and enti- iling Office Address,		4. Date Incor	porated or Qualified iness in Florida	02/22		
Suite, Apt	n, etc.		Suite, Apt. (	Suite, Apt. #, etc.			To Do Business in Florida 03/22/1995  5. FEI Number Applied For			
City & State	0	. construit to the contract of the contract	Cily & State	City & State			65-05707/7 Not Applicable			
Zip Country		Zip	Z <sub>1</sub> p Country		6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status					
Tifie(s)		resses of Each Officer Name of Officers and/or Directors	······································		orations must list at le Street Address of Eac Officer and/or Directo Use Post Office Box	;h	4	City / State / Z	<b>Z</b> ip	
D	SHEEHAN	SHEEHAN, JOHN		13762 S.W. 68				# MIAMI FL 33183		
					ρ					
8. Name and Address of Current Registered Agent					9. Name and Address of New Registered Agent					
SHEEHAN, JOHN					Name Street Address (P.O. Box Number is Not Acceptable)					
13762 S.W. 68TH STREET Miami Fl 33183					Suite, Apt. #, Etc.					
COLUMN 1 E VVIVV					City State Zip Code					
10. I, being Signature o Registered	ıl	registered agon of the	above named corp	poration am familiar	with and accept the	obligations of Sec	Date 0 9	FL -24.	-96	
11. Do De	es this c	corporation pa evenue under	y any intan S. 199.032	gible tax to , Florida Sta	the atutes. Yes	□ No □		other side for i on intangible		
this rein owed b <sub>i</sub>	istatement app y the corporati	lication, the reason for	dissolution has bee the names of indiv	in eliminated, the co iduats listed on this	rporate name satisfie form do not qualify fo	s the requirement r an exemption u	napter 607 or 617, F.S. Is of section 607.0401 o nder section 119.07(3)(	or 617.0401, F	S., that all fees	

SIGNATURE:

bly F. Shechan 09-3496-3as-3874396