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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **P95000077859 (3)**

1. Corporation Name
CHAMPION CABINET DESIGNS, CORP.

Principal Place of Business	Mailing Address
7760 W 20 AVE #19 HIALEAH FL 33016	7760 W 20 AVE #19 HIALEAH FL 33016-1830

3. Date Incorporated or Qualified: 10/06/1995
3a. Date of Last Report: 05/01/1996
4. FEI Number: 65-0614129 ☐ 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

2. Principal Place of Business	2a. Mailing Address
21 7880 W. 20th Ave.	26 7880 W. 20th Ave.
Suite, Apt. #, etc. 22 #33	Suite, Apt. #, etc. 27 #33
City & State 23 Hialeah, FL	City & State 28 Hialeah, FL.
Zip 24 33016 Country 25	Zip 29 33016 Country 30

9. Name and Address of Current Registered Agent
DIAZ, CARLOS
7760 W 20 AVE #19
HIALEAH FL 33016

10. Name and Address of New Registered Agent
81 Name: DIAZ, Carlos
82 Street Address (P.O. Box Number is Not Acceptable): 7880 W. 20th Ave.
83 #33
84 City: Hialeah FL 85 Zip Code: 33016

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] 3/17/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	FPTS DIAZ, CARLOS 7760 W 20 AVE #19 HIALEAH FL 33016	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	FPT 7880 W 20 VA AVE #33	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	DS NESTOR MARELO 7880 W 20TH AVE #33 Hialeah, FL 33016	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: [signature] DIAZ 3/17/97

CR2E034 (9/96)