

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000010760

FILED
Apr 26, 2005
Secretary of State

Entity Name: DREAM KITCHEN INSTALLATIONS, INC.

Current Principal Place of Business:

4949 PENNSBURY DR
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

4949 PENNSBURY DR
TAMPA, FL 33624

New Mailing Address:

FEI Number: 59-3368741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PULVER, TIM
4949 PENNSBURY DR
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

PULVER, TIM M
4949 PENNSBURY DR
TAMPA, FL 33624 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: TIMOTHY PULVER

04/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PULVER, TIM
Address: 4949 PENNSBURY DR
City-St-Zip: TAMPA, FL 33624

Title: V () Delete
Name: PULVER, DAWN
Address: 4949 PENNSBURY DR
City-St-Zip: TAMPA, FL 33624

Title: S () Delete
Name: WADDELL, JAMES R
Address: 3802 N GREEN AVE #2206
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PULVER, TIM M
Address: 4949 PENNSBURY DR
City-St-Zip: TAMPA, FL 33624

Title: V (X) Change () Addition
Name: PULVER, DAWN A
Address: 4949 PENNSBURY DR
City-St-Zip: TAMPA, FL 33624

Title: S (X) Change () Addition
Name: WADDELL, JAMES R
Address: 15706 SCRIMSHAW DR
City-St-Zip: TAMPA, FL 33624

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: DAWN PULVER

V

04/26/2005

Electronic Signature of Signing Officer or Director

Date