

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # P96000071821

1. Entity Name  
WORLDWIDE CABINETRY, INC.



Principal Place of Business

2501 AYERS HILL CT.  
LUTZ, FL 33559 US

Mailing Address

2501 AYERS HILL CT.  
LUTZ, FL 33559 US



04132008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3402527

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MCCREARY, MARTIN  
2501 AYERS HILL CT.  
LUTZ, FL 33559

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MCCREARY, MARTIN
STREET ADDRESS	2501 AYERS HILL CT
CITY - ST - ZIP	LUTZ, FL 33559
TITLE	P
NAME	MCCREARY, MARTIN
STREET ADDRESS	2501 AYERS HILL CT
CITY - ST - ZIP	LUTZ, FL 33559
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U000000905549  
05/01/08-80051-011 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Martin D McCreary* MARTIN D MCCREARY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-08

Date

813 363 3527

Daytime Phone #