## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P98000092366

1. Entity Name KITCHENS & BATHS BY MICHAEL, INC.



Mailing Address

Principal Place of Business 7431 N.W. 23RD STREET SUNRISE, FL 33313

7431 N.W. 23RD STREET SUNRISE, FL 33313

## FILED Apr 12, 2006 08:00 AM Secretary of State



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		**************************************			<b>UI AUL</b>

	FEI Number	Applied For
	65-0873911	Not Applicable

5. Certificate of Status Desired

04062006

\$8.75 Additional Fee Required

CR2E034 (11/05)

Name and Address of Current Registered Agent
OS, MICHAEL

ANTONAKOS, MICHAEL 7431 N.W. 23RD STREET SUNRISE, FL 33313

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

No Chg-P

				IN	THIS SPACE				
	named entity submits this statement for the pons of registered agent.	ourpose of changing its registere	d office or r	egistered <del>age</del> nt, or bo	oth, in the State of Florida. I am familiar with, and accept				
Signature, lyped or profiled name of registered egent and title it applicable. (NOTE: Registered Agent signature required when reinstalting) DATE									
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finan- Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	800000505623 04/26/06-80125-005 158.75				
16.	OFFICERS AND DIREC	CTORS							
NTLE NAME SIREL) ADDRESS CITY-ST-ZIP	PSD ANTONAKOS, MICHAEL 7431 N.W. 23RD STREET SUNRISE, FL 33313								
TITLE NAME STREET AUDRESS CITY-ST-ZIP									
TITLE NAME STREET ADDRESS CXTY-ST-ZIP				DO NOT WRITE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE						
TITLE HAME STREET ADDRESS CITY-ST-DP									
TITLE NAME STREET ADDRESS GITY-ST-ZIP									
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 it 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.									