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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUN	MENI # S48144				
1. Corporation Name					
CHEATIV	'E DESIGN CABINETRY, INC	14			
Principal Place	of Business	Mailing Address		I REBUKEND AN DIEDU RURT ANDRI DIDIN BIDIN BIDIN BIDIN	BIBAL BIBIL BIBAL BIBIL BABIE IDEE
1		6619 FOREST HILL BLVD			
6619 FOREST HILL BLVD. 6619 FOREST HILL BLVD WEST PALM BEACH FL 33413 WEST PALM BCH FL 33413					
US US				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualifed 04/18/1991	
Principal Place of Business 2a. Mailing Address		2a. Mailing Address		4. FEI Number	Applied For
21 26		26		65-0256991	Not Applicable
Suite, Apt. #, etc. Suite,		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27			0. Outdood of the control of the c	- Fee Required
	City & State City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Country	8. This corporation owes the current year in	
<u> </u>	25	29 3	- ·	Personal Property Tax.	∐Yes ☐No
24	9. Name and Address of Current			10. Name and Address of New Registered	Agent
		<u> </u>	81 Name		
HOBGOOD, WILBUR				dress (P.O. Box Number is Not Acceptable)	•
2189 RADNOR COURT			02 Street Aut	diess (F.O. Box Number is Not Acceptable)	
NORTH PALM BEACH FL 33408			83	• •	
			84 City		85 Zip Code
	$\overline{}$,	1 1	FL	_ '
11. Pursuant t	to the provisions of Sections 607.0502	and 607 1508, Florida Statutes	, the above-named cor	rporation submits this statement for the purpose of tion's board of directors. I hereby accept the appo	changing its registered
office or re	egistered agent, or both, in the State o Namiliar with, and accept the obligati	t Florida./Such change was abli ons of, Section 607-0505, Elorid	norized by the corporal la Statutes. 109, AG	entil A President	I had -
SIGNATURE	(1) (4,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1	VERITATION POPULATION	RICH DIO	In Holwed Wilbur Hobboa	20 1/20/99 I
	<u> </u>		egistered Agent signature requi		
12.	OFFICERS AND	D DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
TITLE	P WILBUR	□ DELETE	1.1 TITLE		Containing Containing
NAME	HOBGOOD, WILBUR 2189 RADNOR COURT		1.2 NAME		
STREET ADDRESS	NORTH PALM BEACH FL		1.3 STREET ADDRESS		
CITY-ST-ZIP	ST ST	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		☐ Change ☐ Addition
TITLE	HOBGOOD, VELYN	LJ DECETE	2.2 NAME		
NAME	2189 RADNOR COURT		2.3 STREET ADDRESS		
STREET ADDRESS	NORTH PALM BEACH FL		2. 4 CITY-ST-ZIP		-
CITY-ST-ZIP	VP	☐ DELETE	3.1 TITLE V	P	Change Addition
NAME	DIEGEL, FRANK	_	3.2 NAME	jeael, Frank	
STREET ADDRESS	1081 WESTCHESTER DRIVE		3.3 STREET ADDRESS	Diegel, Frank 23 Citrus Dri	
CITY-ST-ZIP	WEST PALM BEACH FL		3.4. CITY-ST-ZIP	RIVIERA BEACH F1 33404	f
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME	*	
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STOCET ADDRESS		•	6.3 STREET ADDRESS)

CITY-ST-ZIP 14. I 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 chapter or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS