

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V34614

1. Entity Name

CREATIVE DESIGNS IN CABINETS, INC.

Principal Place of Business

3301 N.W. 22ND TERRACE  
#800-F  
POMPANO BEACH FL 33069

Mailing Address

3301 N.W. 22ND TERRACE  
#800-F  
POMPANO BEACH FL 33069

2. Principal Place of Business

3675 N.W. 124<sup>th</sup> Ave  
Suite, Apt. #, etc.

3. Mailing Address

3675 N.W. 124<sup>th</sup> Ave  
Suite, Apt. #, etc.

City & State

Coral Springs, FL  
Zip 33065

Country

City & State

Coral Springs, FL  
Zip 33065

Country

4. FEI Number

65-0351164

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PARRISH, JERRY W.  
1537 N.W. 108TH AY  
CORAL SPRINGS FL 33071

7. Name and Address of New Registered Agent

Name

SAME

Street Address (P.O. Box Number is Not Acceptable)

3675 N.W. 124 Avenue ERROR

Coral Springs

City

FL

Zip Code

33065

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.

SIGNATURE Jerry W. Parrish

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

(NOTE: Registered Agent signature required when reinstating)

Jerry W. Parrish

4-27-01

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

☒

FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

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\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD  
NAME PARRISH, JERRY W.  
STREET ADDRESS 1537 N.W. 108TH WAY  
CITY-ST-ZIP CORAL SPRINGS FL ☐ Delete

TITLE VD  
NAME PARRISH, SHERRY L.  
STREET ADDRESS 1537 N.W. 108TH WAY  
CITY-ST-ZIP CORAL SPRINGS FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jerry W. Parrish, Pres. Jerry W. Parrish, Pres. 4-27-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

003705



DO NOT WRITE IN THIS SPACE

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