

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000060731

Entity Name: MASTERPIECE CABINETRY, INC.**Current Principal Place of Business:**623 S. YONGE STREET
ORMOND BEACH, FL 32174**Current Mailing Address:**200 GREENBRIAR AVE
ORMOND BEACH, FL 32174 US**FEI Number:** 59-3746061**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VOLINSKY, ROBERT J
200 GREENBRIAR AVENUE
ORMOND BEACH, FL 32174 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	SD
Name	KELLY, VOLINSKY C
Address	200 GREENBRIAR AVE
City-State-Zip:	ORMOND BEACH FL 32174

Title	TD
Name	VOLINSKY, KELLY C
Address	200 GREENBRIAR AVE
City-State-Zip:	ORMOND BEACH FL 32174

Title	PVD
Name	VOLINSKY, ROBERT J
Address	200 GREENBRIAR AVE
City-State-Zip:	ORMOND BEACH FL 32174

I hereby 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 all other like empowered.

SIGNATURE: ROBERT VOLINSKY

PRESIDENT

02/23/2023

Electronic Signature of Signing Officer/Director Detail_____
Date