

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 574991

FILED  
Apr 25, 2006  
Secretary of State

Entity Name: FLORIDA CABINET & MILLWORK, INC.

**Current Principal Place of Business:**

860 N.E. 44TH STREET  
OAKLAND PARK, FL 33334

**New Principal Place of Business:**

**Current Mailing Address:**

860 N.E. 44TH STREET  
OAKLAND PARK, FL 33334

**New Mailing Address:**

FEI Number: 59-1828230      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

FISCH, MAX  
1130 NE 18TH AVE  
FT LAUDERDALE, FL 33304      US

**Name and Address of New Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: FISCH, MAX,  
Address: 1130 NE 18TH AVENUE, #3  
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: S ( ) Delete  
Name: RYAN, MARTHA K  
Address: 351 N W 42ND AVENUE  
City-St-Zip: COCONUT CREEK, FL 33066

Title: VT ( ) Delete  
Name: POSCH, REINHARD  
Address: 1130 NE 18 AVE. #1  
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: POSCH, REINHARD  
Address: 1130 NE 18 AVE. #1  
City-St-Zip: FORT LAUDERDALE, FL 33304 US

Title: T ( ) Change (X) Addition  
Name: RYAN, LAWRENCE S  
Address: 351 NW 42 AVENUE  
City-St-Zip: COCONUT CREEK, FL 33066 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MAX FISCH

PD

04/25/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date