

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K41767

**FILED**  
**Feb 10, 2012**  
**Secretary of State**

**Entity Name:** R.W. SCHARF CABINETS AND MILLWORK, INC.

**Current Principal Place of Business:**

4180 N.W. 10TH AVENUE  
OAKLAND PARK, FL 33309 US

**New Principal Place of Business:**

4755 NE 12TH AVENUE  
OAKLAND PARK, FL 33334 US

**Current Mailing Address:**

P.O. BOX 19147  
FT. LAUDERDALE, FL 33318 US

**New Mailing Address:**

P.O. BOX 19147  
PLANTATION, FL 33318

FEI Number: 65-0083622

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHARF, RANDOLPH W.  
4180 NW 10TH AVE.  
OAKLAND PARK, FL 33309 US

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

SCHARF, RANDOLPH W.  
4755 NE 12TH AVENUE  
OAKLAND PARK, FL 33334 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

02/10/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: SCHARF, DEBRA  
Address: 7460 PLANTATION ROAD  
City-St-Zip: PLANTATION, FL 33317

Title: VTD  
Name: SCHARF, RANDOLPH  
Address: 7460 PLANTATION ROAD  
City-St-Zip: PLANTATION, FL 33317

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: DEBRA J SCHARF

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

02/10/2012

\_\_\_\_\_  
Date