above, or on an attachment with all other like empowered.

SIGNATURE: CLIFFORD L SEEFLOTH

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# V21318 Entity Name: A-1 ACCENT CABINETS, INC.

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

300 SE 24TH STREET CAPE CORAL, FL 33990

Current Mailing Address:

300 SE 24TH STREET CAPE CORAL, FL 33990

FEI Number: 65-0318462

Name and Address of Current Registered Agent:

SEEFLOTH, CLIFFORD L. 300 SE 24TH STREET CAPE CORAL, FL 33990 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

Officer/Director Detail :

| Title | DP | Title | VP |
|-----------------|-----------------------|-----------------|---------------------|
| Name | SEEFLOTH, CLIFFORD L. | Name | SEEFLOTH, ROXANNE D |
| Address | 300 SE 24TH STREET | Address | 300 SE 24TH STREET |
| City-State-Zip: | CAPE CORAL FL 33990 | City-State-Zip: | CAPE CORAL FL 33990 |

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

PRESIDENT

04/28/2017

Date

FILED Apr 28, 2017 Secretary of State CC9038086818

Certificate of Status Desired: No

Date