

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # L86297

1. Entity Name
FINE FRAMING, INC.



Principal Place of Business
**2561 COUNTRYSIDE BLVD
SUITE 5
CLEARWATER, FL 33761 US**

Mailing Address
**2561 COUNTRYSIDE BLVD
SUITE 5
CLEARWATER, FL 33761 US**



03272004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3021028

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HARRIS, SUSAN
747 RUSTIC OAKS DR
PALM HARBOR, FL 34684**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature of the individual or legal entity and the date

Printed Name of Agent and the date

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**PVT
HARRIS, SUSAN
747 RUSTIC OAKS DR
PALM HARBOR, FL 34684**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**SD
HARRIS, SUSAN
747 RUSTIC OAKS DR
PALM HARBOR, FL 34684**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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CITY ST ZIP

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04/30/04-80038-007 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information included 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 10 or Block 11 if changed or on an attachment with an address with all other like empowered.

SIGNATURE: **Susan J. Harris, President**
Susan Harris President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/04

727-791-0704