2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P0000018242 1. Entity Name FINE FINISHINGS CORPORATION				FILED. 04 NAY 10 PM 3: 05				
Principal Place of Business Mailing Address 784 NW 107TH STREET 784 NW 107TH STREET MIAMI, FL 33168 US MIAMI, FL 33168 US					SECRETAR	RY OF STATE SEE, FLORIDA		
2. Principal Place of Business 734 NW 107 Street Suite, Apt. #, etc.	NW 107 Street 734 NW 107 Street			04142004	Chg-P	CR2E034 (10/00		
City & State Miami, Florida 3316				4. FEI Numbe 65-110		. —	Applied For Not Applicable	
Zip Country 33168 USA	z _{ip} 33168	Country USA		<u> </u>	of Status Desired	□ \$8.75 A Fee Requ		
Name and Address of Current Registered Agent Na								
BROWN, ROBERT: 12465 NW 18TH COURT MIAMI, FL 33167			Robert Brown Street Address (P.O. Box Number is Not Acceptable) 734 NW 107 Street					
				ni		FL Zpc	ode 68	
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, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered Agent	signature require	ed when reinstating)		DATE		
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.	9. Election Campa Trust Fund Conf		\$5 □ Add	i.00 May Be ded to Fees				
10. OFFICERS AND		11.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS,	CHANGES TO OFF	ICERS AND DIRECTO		
TITLE PS NAME BROWN, ROBERT STREET ADDRESS 12465 NW 18TH COURT CITY-ST-ZIP MIAMI, FL 33167	☐ Delete	NAME STREET ADDR	iess 1 (rown 2 Court on, FL 3		e 🔲 Addition	
TITLE T	☐ Delete	TITLE	F.	<u> Iantati</u>	ОП, ГЦ Э	☐ Chang	e 🗌 Addition	
NAME BROWN, REGINA STREET ADDRESS 10314 NW 2ND COURT CITY-ST-ZIP PLANTATION, FL 33324		NAME Street addi City-St-Zip		06/7	00038 29/040109	042592 59013 **	6 150.00	
TITLE VP J NAME JOHNSON, KEVIN STREET ADDRESS 775 NW 198TH STREET	X Dolete	TITLE NAME STREET ADDI	- · · · · I			Chang	e Addition	
CITY-ST-ZIP MIAMI, FL 33169	☐ Delete	CITY-ST-ZIP				☐ Chan	e 🗀 Addition	
NAME STREET AUDRESS CITY-ST-ZIP	L. I Divisio	NAME STREET ADDI CITY-ST-ZIP	1					
TITLE NAME STREET ADDRESS	☐ Delete	TITLE NAME STREET ADD	RESS			Chan	ge 🔲 Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS	☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADD	RESS		,	☐ Chan	noifibbA 🔲 sç	
CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the Information indicated 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: SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Designer Plane								