

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 15, 2004 8:00 am
Secretary of State

06-15-2004 90002 020 ***150.00

DOCUMENT # P00000079139	
1. Entity Name FINE RITE SUPERVISION, INC.	

Principal Place of Business 3151 N. COURSE LANE SUITE 106 POMPANO BEACH, FL 33069	Mailing Address 3151 N. COURSE LANE SUITE 106 POMPANO BEACH, FL 33069
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06072004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1059066	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

GOZAN, MARIANA
2861 N OAKLAND FOREST DR
APT. 101
FORT LAUDERDALE, FL 33309

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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 Registered Agent or Designated Agent) **DATE** _____

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HILSBERG, BEATRIZ 3151 N. COURSE LANE POMPANO BEACH, FL 33069
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GOZAN, MARIANA 905 CYPRESS TERRACE #1026 POMPANO BEACH, FL 33069
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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: Mariana Gozan 6/14/04 9:41 978-8300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR