2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 16, 2007 08:00 AM Secretary of State **DOCUMENT # P00000081589** SUNCOAST FINISHING, INC. Principal Place of Business Mailing Address 164 THOMAS AVE P.O. BOX 492 OSTEEN, FL 32764 OSTEEN, FL 32764 04112007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3665298 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BRIDGER, DENNIS DO NOT WRITE 164 THOMAS AVE OSTEEN, FL 32764 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 Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PSTD TITLE BRIDGER, DENNIS NAME 164.THOMAS AVE STREET ADDRESS CITY-ST-ZIP OSTEEN, FL 32764 TITLE NAME . U00000707578 04/24/07-80075-025 150.00 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. It hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 ampowered.

SIGNATURE

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED ON PRINTED NAME OF STORING OFFICIAL OR DIRECTO

04-13-07

407-314-7706

FILED

Daytime Phone #