

# **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P01000019600

Entity Name: THE FINAL DETAIL, INC.

**FILED**  
**Jan 27, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

8794 FAWN RIDGE DR.  
FORT MYERS, FL 33912

**New Principal Place of Business:**

**Current Mailing Address:**

8794 FAWN RIDGE DR.  
FORT MYERS, FL 33912

**New Mailing Address:**

FEI Number: 65-1089193

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ENGUITA, MARIA L  
8794 FAWN RIDGE DRIVE  
FORT MYERS, FL 33912 US

**Name and Address of New Registered Agent:**

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ENGUITA, STEVEN  
Address: 3292 HAMPTON BLVD  
City-St-Zip: ALVA, FL 33920

Title: P  
Name: ENGUITA, STEVEN  
Address: 3292 HAMPTON BLVD  
City-St-Zip: ALVA, FL 33920

Title: VP  
Name: ENGUITA, MARIA  
Address: 3292 HAMPTON BLVD  
City-St-Zip: ALVA, FL 33920

Title: S  
Name: STEVEN, ENGUITA  
Address: 8794 FAWN RIDGE DRIVE  
City-St-Zip: FORT MYERS, FL 33912

Title: T  
Name: STEVE, ENGUITA  
Address: 8794 FAWN RIDGE DRIVE  
City-St-Zip: FORT MYERS, FL 33912

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

SIGNATURE: MARIA L. ENGUITA

VP

01/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date