

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000036945

Entity Name: A FINER FINISH ENTERPRISES, INC.

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

6034 POMPANO STREET
JUPITER, FL 33458

New Principal Place of Business:

1574 SW DOW LANE
PORT SAINT LUCIE, FL 34953

Current Mailing Address:

POST OFFICE BOX 2611
JUPITER, FL 33468

New Mailing Address:

1574 SW DOW LANE
PORT SAINT LUCIE, FL 34953

FEI Number: 65-1090801

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MORSE, LAURA L D
6034 POMPANO STREET
JUPITER, FL 33458 US

Name and Address of New Registered Agent:

MORSE, LAURA L D
1574 SW DOW LANE
PORT SAINT LUCIE, FL 34953 US

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:

05/01/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MORSE, LAURA L
Address: 6034 POMPANO STREET
City-St-Zip: JUPITER, FL 33458

Title: P () Delete
Name: MORSE, PATRICK G
Address: 6034 POMPANO STREET
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MORSE, LAURA L
Address: 1574 SW DOW LANE
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: P (X) Change () Addition
Name: MORSE, PATRICK G
Address: 1574 SW DOW LANE
City-St-Zip: PORT SAINT LUCIE, FL 34953

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: PATRICK G. MORSE

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date