

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

07-26-2004 90004 050 ***150.00

P02000015263


FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 JUL 26 AM 7:58

J4V040U1



MOORE CR2E034 (11/03)

DOCUMENT # P02000015263					
1. Entity Name FINN MARINE CONSULTING, INC.					
Principal Place of Business 1561 SE 24 TERRACE POMPANO BEACH FL 33062			Mailing Address 1561 SE 24 TERRACE POMPANO BEACH FL 33062		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 41-2027849	
				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KOVARS, CINDALEAH 1561 SE 24 TERRACE POMPANO BEACH FL 33062			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	DPST	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	PUNKKA, DARWIN		NAME		
STREET ADDRESS	1307 PEPPERTREE TRAIL, STE. A		STREET ADDRESS		
CITY-ST-ZIP	FT. PIERCE FL 34950		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: <i>Darwin Punkka</i>			Date: <i>July 16, 2004</i> 6045187784		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone #		

81220

Attachments

54064801

TO: Division of Corporations
State of Florida
Tallahassee, Florida

P200015263

To Whom it May Concern

I am writing in ref. To the annual report for FINN MARINE CONSULTING, INC.

I just received the forms from my accountant and realize they are quite late. My job carries me to many places and I'm often hard to find. I believe my accountant filed for an extension on my behalf when she couldn't locate me earlier in the year. Then she sent the forms to a former address and that was returned to her.

I am now on a one year consulting job in British Columbia, Canada. I just received my forms for this year and am asking you to forgive the late fees. I know it is my obligation to keep my agent apprised of my location at all times and will do so in the future. Find enclosed my check for \$150.00. As I concerned about possibly losing my corporate status, if I have to pay the late fees could someone contact me in Canada. My cell phone # is 1-604-518-7984. My address is
23352 Fishermans Road
Maple Ridge, BC
Canada V2W 1B9

I thank you for any help I can get on this matter.

Sincerely

Darwin Punkka

