

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000090605	
1. Entity Name THE FINE GROUP, INC.	

Principal Place of Business 4731 CENTRAL AVE. ST. PETERSBURG, FL 33713	Mailing Address 4731 CENTRAL AVE. ST. PETERSBURG, FL 33713
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02212004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 58-2373510	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent TROUP, DAVID L 4731 CENTRAL AVE. ST. PETERSBURG, FL 33713

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IN THIS SPACE**

7. 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 _____ DATE _____
Signature, typed or printed name of registered agent and fee if applicable. (Not for Registered Agent Signature required when returning)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

8. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HENENBERGER, HOLLY 7880 9TH AVE. SOUTH ST. PETERSBURG, FL 33707
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERRY, MARTHA F 3129 SHORELINE DR. CLEARWATER, FL 33760
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FINE, WILLIAM B 11100 7TH ST. EAST TREASURE ISLAND, FL 33706
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANDERSON, AMY M 1700 80TH ST. NORTH ST. PETERSBURG, FL 33710
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FINE, JAMES B 1359 80TH ST. SOUTH ST. PETERSBURG, FL 33707
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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05/04/04-80043-012-150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  **4/29/04** **727-323-1309**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date City or the Office of