

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 12, 2004 8:00 am**  
**Secretary of State**

07-12-2004 90023 044 \*\*\*158.75

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                       |                                                                                                                                                                                                                       |                                                                                                                                                                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>DOCUMENT # P03000033877</b><br>1. Entity Name<br><b>DECORATIVE FINISHES BY TONY, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                       |                                                                                                                                                                                                                       |                                                                                                                                                                          |
| Principal Place of Business<br><b>5028 ASHLEY LAKE PARK DR., APT. 318<br/>BOYNTON BCH, FL 33437</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                       | Mailing Address<br><b>P. O. BOX 425<br/>DEERFIELD BCH, FL 33443</b>                                                                                                                                                   |                                                                                                                                                                          |
| 2. Principal Place of Business<br><b>5025 Ashley Lake Dr.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                       | 3. Mailing Address<br>Suite, Apt. #, etc.<br><b>Apt. 231</b>                                                                                                                                                          |                                                                                                                                                                          |
| City & State<br><b>Boynton Beach, Florida</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                       | City & State<br><b>Boynton Beach, Florida</b>                                                                                                                                                                         |                                                                                                                                                                          |
| Zip<br><b>33437</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Country<br><b>U.S.A</b>                                                                                                               | Zip<br><b>33437</b>                                                                                                                                                                                                   | Country<br><b>U.S.A</b>                                                                                                                                                  |
| 4. FEI Number<br><b>05-0565458</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                       | Applied For<br><input type="checkbox"/> Not Applicable                                                                                                                                                                |                                                                                                                                                                          |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                       | 07072004 Chg-P CR2E034 (10/03)                                                                                                                                                                                        |                                                                                                                                                                          |
| 6. Name and Address of Current Registered Agent<br><br><b>PEREZ, HAYDEE<br/>2277 SUMMIT BLVD.<br/>W. PALM BCH, FL 33406</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                       | 7. Name and Address of New Registered Agent<br>Name _____<br>Street Address (P.O. Box Number is Not Acceptable) _____<br>City _____ <b>FL</b> 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.<br><br>SIGNATURE _____ (NOTE: Registered Agent signature required when registering) DATE _____                                                                                                                                                                                                                                                                                                                      |                                                                                                                                       |                                                                                                                                                                                                                       |                                                                                                                                                                          |
| <b>FILE NOW!!! FEE IS \$150.00<br/>Due by September 8, 2004</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                       | 9. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b><br>In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |                                                                                                                                                                          |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                       | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                                                                                                 |                                                                                                                                                                          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>D<br/>GOMES, ANTONIO D</b> <input type="checkbox"/> De/ete<br><b>5028 ASHLEY LAKE PARK DR., APT. 318<br/>BOYNTON BCH, FL 33437</b> | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                        | <b>0<br/>Sindy Lopez</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br><b>5025 Ashley Lake Dr, Apt 231<br/>Boynton Beach, FL 33437</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> De/ete                                                                                                       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> De/ete                                                                                                       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> De/ete                                                                                                       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> De/ete                                                                                                       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> De/ete                                                                                                       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                        |
| 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. |                                                                                                                                       |                                                                                                                                                                                                                       |                                                                                                                                                                          |
| <b>SIGNATURE:</b> <b>Antonio D Gomes</b> <b>07/08/04</b> <b>(954)914-9408</b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                       |                                                                                                                                                                                                                       |                                                                                                                                                                          |