

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 90430 017 \*\*\*150.00

|  |  |   |   |  |  |
|--|--|---|---|--|--|
| <b>DOCUMENT # P03000056440</b>   |  |   |   |  |  |
| <b>1. Entity Name</b><br>FINISHLINE FINANCIAL GROUP, INC   |  |   |   |  |  |
| <b>Principal Place of Business</b><br>2308 ECON CIRCLE<br>182<br>ORLANDO, FL 32817 US  |  |   | <b>Mailing Address</b><br>2308 ECON CIRCLE<br>182<br>ORLANDO, FL 32817 US   |  |  |
| <b>2. Principal Place of Business</b><br>650 Douglas Ave<br>Suite, Apt. #, etc.<br>1035  |  | <b>3. Mailing Address</b><br>650 Douglas Ave<br>Suite, Apt. #, etc.<br>1035                       |   |  |  |
| <b>City &amp; State</b><br>Altamonte Springs FL  |  | <b>City &amp; State</b><br>Altamonte Springs FL   |   | <b>4. FEI Number</b><br>56-2363960   |  |
| <b>Zip</b><br>32714  |  | <b>Country</b><br>America   |   | <b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |  |
| <b>6. Name and Address of Current Registered Agent</b><br>HEIT, RYAN C<br>2308 ECON CIRCLE<br>182<br>ORLANDO, FL 32817   |  |   | <b>7. Name and Address of New Registered Agent</b><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <span style="float: right;">FL</span> Zip Code |  |  |
| <b>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.</b>   |  |   |   |  |  |
| SIGNATURE _____ (NOTE: Registered Agent Signature required when reinstating) DATE _____  |  |   |   |  |  |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2004 Fee will be \$550.00</b>  |  | <b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |   |  |  |
| <b>10. OFFICERS AND DIRECTORS</b>  |  |   | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | P<br>HEIT, RYAN C<br>2308 ECON CIRCLE<br>ORLANDO, FL 32817 | <input type="checkbox"/> Delete   |   |  |  |
| 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"/> Change <input type="checkbox"/> Addition                                 |   |  |  |
| 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"/> Change <input type="checkbox"/> Addition                                 |   |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                 |   |  |  |
| <b>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> |  |   |   |  |  |
| <b>SIGNATURE:</b> <b>Ryan Heit</b>   |  |   | 4/29/04 407 388 0005  |  |  |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   |  |   | Date Daytime Phone #  |  |  |