## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000070503  1. Entity Name K M G FINISHING INCORPORATED			
Principal Place of Business 3161 NW 101 AVE. SUNRISE, FL 33351	Mailing Address 3161 NW 101 AVE. SUNRISE, FL 33351		
DO NOT WRITE	State of the state	040720 4. FEI N 55-	
RICKS, GEORGE 3161 NW 101 AVE. SUNRISE, FL 33351		DO NOT WRITE IN THIS SPACE	
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 lamiliar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  (NOTE, Registered Agent signature required when relocating)  DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550	9. Election Campaign Fina Trust Fund Contribution		. U00000355965
10. OFFICERS AND TITLE D RAME RICKS, GEORGE STREET ADDRESS 3161 NW 101 AVE. CITY-ST-ZIP SUNRISE, FL 33351	D DIRECTORS		- USA UNA US SUU18 UES 136, 15
TITLE MARKE STREET ADDRESS CITY-ST-ZIP TITLE			
NAME STREET ADDRESS CITY-ST-ZIP TITLE	· · · · · · · · · · · · · · · · · · ·	-	O NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP		Translation of the second	I THIS SPACE
TITLE NAME STREET ADDRESS CITY-S1-ZIP			
TITLE NAME STREET ADDRESS GTY-ST-ZIP		and demonstrate large law 1 to 100 and	
12. I hereby certify that the information supplied with this filling 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 thistee employed do 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: SIGNANDRE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date of			