


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 11, 2005 8:00 am**  
**Secretary of State**

07-11-2005 90117 035 \*\*\*150.00

<b>DOCUMENT # P03000149305</b> 1. Entity Name <b>C &amp; A FINISHER, INC.</b>					
Principal Place of Business <b>6711 SW 48 TERR. MIAMI, FL 33155-5745</b>			Mailing Address <b>6711 SW 48 TERR. MIAMI, FL 33155-5745</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>APPLIED FOR 56-2447129</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>ANTIGUA, CARLOS 6711 SW 48 TERR. MIAMI, FL 33155-5745</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 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.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)					
<b>FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP <b>ANTIGUA, CARLOS 6711 SW 48 TERR MIAMI, FL 331555745</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS 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>07-06-05</b>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

ATTACHMENT

20062350

C&A FINISHER, INC.  
6711 SW 48<sup>th</sup> Terrace  
Miami, FL 33155

July 6, 2005

Florida Department of State  
Division of Corporations  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

Re: 2005 For Profit Corporation Annual Report document #P03000149305

Gentlemen:

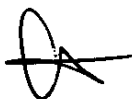
On this date we are sending the "2005 For Profit Corporation Annual Report" duly signed and including the required fees for \$150.00. Please accept this letter as our request to revoke the " Notice of Intent to Dissolve C&R Finisher, Inc." issued by your Division of Corporations Department.

C&A Finisher, Inc." has been inactive in 2004 and just began business on mid year 2005. Unfortunately we did not receive any notification concerning the report in question. We followed instructions listed in the notice Option 2, download the report and is being sent it along with this letter and our check #1000 dated 07-06-05 in the amount of \$150.00.

Please, accept our apology for any inconvenience and our appreciation for your help and assistance in this matter.

Respectfully,

C&A FINISHER, INC.



Carlos A. Antigua  
President

Enclosures:  
2005 Corporation Annual Report  
Check #1000 for \$150.00