## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000017499

Entity Name: FINEST WALLCOVERING, INC.

FILED Sep 06, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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111 DIANNE DRIVE ORMOND BEACH, FL 32176

Current Mailing Address: New Mailing Address:

111 DIANNE DRIVE ORMOND BEACH, FL 32176

FEI Number: 20-0635718 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

A1A TAX & BOOKKEEPING, INC.

55 LONGWOOD DRIVE

ODMOND BEACH EL 22176 LIS

ODMOND BEACH EL 22176 LIS

ORMOND BEACH, FL 32176 US ORMOND BEACH, FL 32176 US

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.

SIGNATURE: EUGENE HEANEY 09/06/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HEANEY, EUGENE W
 Name:

 Address:
 111 DIANNE DRIVE
 Address:

 City-St-Zip:
 ORMOND BEACH, FL 32176
 City-St-Zip:

Title: VP ( ) Delete Title: TRES (X) Change ( ) Addition Name: HEANEY, EUGENE W Name: HEANEY, EUGENE W

Address: 111 DIANNE DRIVE Address: 111 DIANNE DRIVE
City-St-Zip: ORMOND BEACH, FL 32176 City-St-Zip: ORMOND BEACH, FL 32176

Title: SEC. ( ) Delete Title: SEC. (X) Change ( ) Addition Name: SEDOTTO, JOSEPH Name: HEANEY, EUGENE W

Address: 4 MELALEUCA CIRCLE Address: 11 DIANNE DR

City-St-Zip: ORMOND BEACH, FL 32176 City-St-Zip: ORMOND BEACH, FL 32176

Title: TRES () Delete Title: VP (X) Change () Addition Name: HEANEY, EUGENE W Name: HEANEY, EUGENE W

Address: 111 DIANNE DRIVE Address: 111 DIANNE DR
City-St-Zip: ORMOND BEACH, FL 32176 City-St-Zip: ORMOND BEACH, FL 32176

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EUGENE HEANEY PRES 09/06/2005