## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000116538

FILED Jan 03, 2005 Secretary of State

Entity Name: FINAL ADDITIONS CLASSIC RESTORATIONS, INC.

Current Principal Place of Business:		New Principal Place of Business:		
825 35TH VERO BE	CT. S.W. ACH, FL 32968			
Current N	lailing Address:		New Mailing Addres	ss:
825 35TH VERO BE	CT. S.W. ACH, FL 32968			
FEI Number	: FEI	Number Applied For()	FEI Number Not Applicable (X)	Certificate of Status Desired ( )
Name and	d Address of Curren	t Registered Agent:	Name and Address	of New Registered Agent:
1405 16TH	PATRICK C 1 CT. S.W. ACH, FL 32962 U	S		
	e named entity submit e of Florida.	s this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
in the Stat	e of Florida.	rs this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
in the Stat	e of Florida.	s this statement for the property of Registered Agreement for Registered		ed office or registered agent, or both,  Date
in the Stat	e of Florida.	nature of Registered Ag		
in the State SIGNATU  Election Ca	e of Florida.  RE: Electronic Sig	nature of Registered Agr	ent	
in the State SIGNATU  Election Ca	e of Florida.  RE: Electronic Sig  mpaign Financing Trust	nature of Registered Agr Fund Contribution ( ).	ent	Date
in the Stati SIGNATU Election Cal OFFICER Title: Name: Address:	e of Florida.  RE: Electronic Sig  mpaign Financing Trust  S AND DIRECTORS  P () Delete  MOORE, PATRICK C 1405 16TH CT. SW	nature of Registered Agr Fund Contribution ( ). :	ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS:

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: PATRICK C MOORE P 01/03/2005