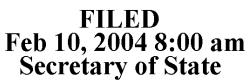
## 2004 FOR PROFIT CORPORATION ANNUAL REPORT



DOCUMENT # P9400023222  1. Entity Name ZARRO CEMENT FINISHING INC.				02-10-2004 90009 010 ***150.00				
Principal Place	e of Business	Mailing Address						
	NANZA DRIVE LS, FL 34465 US	BEVERLY HILLS, FL 344	RIVE STORY OF THE	وجرطران و بنياد د عصره الياد	white the state of the second	All gives the graves have to a free	 	Ŷ± ª
2. Principal P	face of Business	3. Mailing Address 4191 W Bo	ONANZA DR					
Suite, Apt. #, etc. Suite, Apt. #, etc.			UNITNEIT DR	02052004	Chg-P	CR2E034 (1	0/03)	
City & State		City & State BEVERLY HILLS		4. FEI Numb	nber 231784		<del></del>	ied For Applicable
Zip	Country	Zip 34465-4485	Country U.5		of Status Desired		5 Addition	<del></del>
	6. Name and Address of Currer	t Registered Agent		7. Name and	Address of New F	Registered Agent		
ZARRO: M	IICHAELEV		Name	- يتدا يد	·	<del></del>		
4191 W BONANZA DRIVE BEVERLY HILLS, FL 34465			Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
			City			<b>F</b> 2	ip Code	<del></del>
P. The chous	named entity submits this statement	(N		······································		r L	•	
FILI After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550	9. Election Campaig Trust Fund Contrit		5.00 May Be Added to Fees		····		,
0.		D DIRECTORS	T 11.	ADDITIONS	CHANGES TO OFF	ICERS AND DIRE	CTORS II	N 11
TILE	D	☐ Delete	TITLE					Additio
IAME Treet Address	ZARRO, MICHAEL V 4191 N BONANZA DRIVE		NAME STREET ADDRESS					
ITY-ST-ZIP	BEVERLY HILLS, FL 34465		CITY-ST-ZIP					
TLE	PVST	☐ Delete	TITLE	<del></del>			hange [	Additio
AME Treet Address	ZARRO, MICHAEL V 4191 W BONANAZA DRIVE		NAME STREET ADDRESS					
rty-st-zip	BEVERLY HILLS, FL 34465		CITY-ST-ZIP	•				
IILE .		☐ Defele	TITLE	<u> </u>			thange	Additio
TREET ADORESS			NAME STREET ADDRESS					
ITY-ST-ZIP		<del></del>	, CITY-ST-ZIP	و مسو	·- ·		· .	
ITLE		☐ Delete	TITLE				hange [	Additio
AME Treet address			NAME STREET ADDRESS	•				
ITY-ST-ZIP	, 		CITY-ST-ZIP					
ITLE AME		☐ Delete	TITLE				hange [	Additio
TREET ADORESS			NAME STREET ADDRESS					
ITY-ST-ZIP			CITY-ST-ZIP					
TLE ALLE		Delete	TITLE				hange [	Additio
AME Treet address			NAME STREET ADORESS		•			
CITY-ST-ZIP			CITY-ST-ZIP					
2. I hereby of indicated of the conchanged	certify that the information supplied with on this report or supplemental report poration or the receiver of trustee end or on an attachment with an address.	th this filing does not qualify for the istrue and accurate and that my powered to execute this report as the file and the state of the	he exemption stated in signature shall have the srequired by Chapter	Section 119.07(3) he same legal effet 607, Florida Statute	(i), Florida Statutes. of as if made under es; and that my nam	I further certify the oath; that I am an ie appears in Bloo	at the info officer or k 10 or Bl	rmation director lock 11 if
unany <del>c</del> o,	or on an allachment with an aladress	העיש, all other like empowered.						
-		THINTED NAME OF SIGNING OFFICER OF						