

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jun 14, 2007 08:00 A**  
**Secretary of State**

DOCUMENT # P98000022147

1. Entity Name  
FINAL TOUCH INTERIORS, INC.



Principal Place of Business  
6309 TANGER COVE  
BRADENTON, FL 34202

Mailing Address  
6309 TANGER COVE  
BRADENTON, FL 34202



04032007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0815713	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

BRUNO, MARIANNE  
6309 TANGER COVE  
BRADENTON, FL 34202

**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 familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	S
NAME	BRUNO, MARIANNE
STREET ADDRESS	6309 TANGER COVE
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	P
NAME	BRUNO, JAMES
STREET ADDRESS	6309 TANGER COVE
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	V
NAME	HAYGOD, STEVE
STREET ADDRESS	3533 BAHIA VISTA
CITY-ST-ZIP	SARASOTA, FL 34239
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000766302  
06/14/07-80002-003 550.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

James Bruno 5-5-07

954-232-1305