

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Jan 23, 2006 08:00 AM  
Secretary of State**

**DOCUMENT # P98000031601**

1. Entity Name

**FINELINE DEVELOPMENT CORPORATION**



Principal Place of Business

**222 INDUSTRIAL BLVD  
#116  
NAPLES, FL 34104**

Mailing Address

**222 INDUSTRIAL BLVD  
#116  
NAPLES, FL 34104**

**DO NOT WRITE IN THIS SPACE**



01172006 No Chg-P CR2E034 (11/05)

4. FEI Number

**65-0825390**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**SALETKO, ROBERTA  
729 LANDOVER CT.  
NAPLES, FL 34104**

**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

*Roberta Saletko*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

*Secretary*

*1-17-06*

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	STD
NAME	SALETKO, ROBERTA
STREET ADDRESS	729 LANDOVER CT.
CITY - ST - ZIP	NAPLES, FL 34104
TITLE	PD
NAME	GENET, JOHN J
STREET ADDRESS	580 SAN MARCOS BLVD
CITY - ST - ZIP	NAPLES, FL 34104
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1100000395374  
01/25/06 80049-012 150.00

**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

*[Signature]* *1-17-06* *239-793-8909*

Date

Daytime Phone #