

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # S10236 (5)  
1. Corporation Name  
**ALL FINISH, INC.**



Principal Place of Business: 264 PARK AVENUE NORTH WINTER PARK FL 32789  
Mailing Address: 284 PARK AVENUE NORTH WINTER PARK FL 32789

3. Date incorporated or Qualified: 11/01/1990  
3a. Date of Last Report: 06/07/1995  
4. FEI Number: 59-3035970  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21 450 Commerce Way, Suite Apt. #, etc.: 22 Suite 108, City & State: 23 Longwood FL, Zip: 24 32750, Country: 25 Seminole  
2a. Mailing Address: 26 450 Commerce Way, Suite Apt. #, etc.: 27 Suite 108, City & State: 28 Longwood FL, Zip: 29 32750, Country: 30 Seminole

9. Name and Address of Current Registered Agent  
KINGSLAND, ROBERT  
448 COMMERCE WAY B2  
LONGWOOD FL 32750

10. Name and Address of New Registered Agent  
81 Name: Kingstand, Robert  
82 Street Address (P.O. Box Number is Not Acceptable): 450 Commerce Way  
83 Suite 108  
84 City: Longwood, State: FL, Zip Code: 85 32750

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Robert Kingstand (Signature)  
DATE: 8-9-96

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	KINGSLAND, ROBERT	
STREET ADDRESS	284 PARK AVE. NORTH	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HOOVER, ROBERT	
STREET ADDRESS	284 PARK AVE. NORTH	
CITY-ST-ZIP	WINTER PARK FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	KINGSLAND, Robert	
1.3 STREET ADDRESS	450 COMMERCE WAY, #108	
1.4 CITY-ST-ZIP	LONGWOOD, FL 32750	
2.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	HOOVER, Robert	
2.3 STREET ADDRESS	450 COMMERCE WAY, #108	
2.4 CITY-ST-ZIP	LONGWOOD FL 32750	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Robert Kingstand (Signature)  
DATE: 8-9-96  
PHONE: 407 339-8453

CR2E034 (12/95)