

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S78224

FILED
Mar 19, 2004
Secretary of State

Entity Name: ACTION FINISHING, INC.

Current Principal Place of Business:

2100 N. HWY 360, STE 908-A
GRAND PRAIRIE, TX 75050 US

New Principal Place of Business:

Current Mailing Address:

C/O EDWARD M LIVINGSTON, ESQ
PO BOX 1599
WINTER PARK, FL 32790 US

New Mailing Address:

C/O EDWARD M LIVINGSTON, ESQ
963 TRAIL TERRACE DRIVE
NAPLES, FL 34103 US

FEI Number: 59-3080959

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIVINGSTON, EDWARD M.
628 ELLEN DR
WINTER PARK, FL 32790

Name and Address of New Registered Agent:

LIVINGSTON, EDWARD M.
963 TRAIL TERRACE DRIVE
NAPLES, FL 34103

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.

SIGNATURE:

03/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: QUINTERO, MA GUADALUPE
Address: 2100 N. HWY 360, STE 908-A
City-St-Zip: GRAND PRAIRIE, TX 75050

Title: P () Delete
Name: QUINTERO, VALENTE
Address: 2100 N. HWY 360, STE 908-A
City-St-Zip: GRAND PRAIRIE, TX 75050

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MA GUADALUPE QUINTERO

DS

03/19/2004

Electronic Signature of Signing Officer or Director

Date