FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

FILED Apr 23 1998 8:00am Secretary of State

FINISHING TOUCH DESIGNS INC.						
					1201 AND	ALDER ANDEL DIERR BLOKE BLOKE DIBLE HADD
			··			
Principal Place of Business		Mailing Address	Mailing Address			aidit difiti 81811 21811 21811 21811 1831
2351 GENOVA DR		2351 GERNOVA DRIVE				
OVIEDO FL 32785 US		OVIEDO FL 32765 US		DO NOT WRITE II	N THIS SPACE	
00		00			3. Date Incorporated or Qualified	A THIS GLAGE
					04/10/1992	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26	26		59-3125834	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Continuate of States Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
Zip	Country	28	Country			Added to Fees
24	25	Zip	Country		8. This corporation owes or has paid	
24	9, Name and Address of Curren	29 I Registered Agent	30		Personal Property Tax due June 3 10. Name and Address of New Regi	
1 41	Jra a Beljan	· · · · · · · · · · · · · · · · · · ·	81 1	lame	10, Harris and Address of New Hogi	Siered Agent
2351 GENOVA DRIVE						
	EDO FL 32765		82 S	treet Addre	ess (P.O. Box Number is Not Acceptable)
J.,	250 10 02100		83			
			84 0	lity		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050:	2 and 607.1508, Florida Statut	es, the above-na	amed corp	oration submits this statement for the pur	roose of changing its registered
i office or re	o gistor ed agent, or both, in the State m famili ar with, and accept the obliga	of Florida. Such channe was i	authorized by th	e corporati	ion's board of directors. I hereby accept	the appointment as registered
SIGNATURE			orrad blatates.			
	Signature, typied or printed name of registricid ages	· · · · - · · - · · · · · · · · · · · ·	F: Registated Agent s	gnature require	ed when reinstating)	DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE	
TITLE	BEN IAM LALIDA A	L_ DELETE	1.1 TITLE			Change Addition
NAME	Bewan, Laura A. 2351 genova drive		1,2 NAME			
STREET ADDRESS	OVIEDO FL		1.3 STREET ADD			li li
CITY-ST-ZIP TITLE	OAIEDO LE	DELETE	1.4 CiTY - ST - Zi	P		
		וון הנונונ	2 1 TITLE			☐ Change ☐ Addition
NAME CAREET ADDOCCO			2.2 NAME			
STREET ADDRESS			2.3 STREET ADD		:	
CITY-ST-ZIP TITLE		DELETE	2. 4 CITY-S1-Z 3.1 TITLE	IP		Change Addition
NAME		E DECELL	3.1 TITLE 3.2 NAME			LI Grange LI ASURION
STREET ADDRESS			3.3 STREET ADD	BE CC		
CITY-ST-ZIP			3.4. CHY-ST-7			
TITLE		DELETE	4.1 TITLE	"		Change Addition
NAME			4. 2 NAME		•	
STREET ADDRESS			4.3 STREET ADD	RESS		
CITY-ST-ZIP			4.4 CITY - ST - ZII			
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAMÉ			
STREET ADDRESS			5.3 STREET ADD	RESS		
CITY-ST-ZIP			5.4 CITY - ST - ZII			
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			62 NAME			
STREET ADDRESS			63 STREET ADD	RESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIE			
14 I hereby o	ertify that the information supplied will	h this filing doos not qualify for	or the everyntion	plalod in S	Section 110 07/2)(i) Florida Statutos Litur	diverse entity that the interesting

indicated on this annual report or supplied with this liting does not quality for the exemption stated in Section 119.07(3)(i), 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 frustee 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