

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000048051

FILED
May 25, 2005
Secretary of State

Entity Name: FIRST LINE GENERAL SERVICE, INC.

Current Principal Place of Business:

10147 BOCA ENTRADA BLVD
SUITE #225
BOCA RATON, FL 33428

New Principal Place of Business:

22293 MISTY WOOD WAY
BOCA RATON, FL 33428

Current Mailing Address:

10147 BOCA ENTRADA BLVD
POMPANO BEACH, FL 33064

New Mailing Address:

22293 MISTY WOOD WAY
BOCA RATON, FL 33428

FEI Number: 45-0513010

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE ROAD
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VIANA, FRANCISCO E
Address: 10147 BOCA ENTRADA BLVD
City-St-Zip: BOCA RATON, FL 33428

Title: TD () Delete
Name: DE CASSE SA, RITA
Address: 10147 BOCA ENTRADA BLVD
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VIANA, FRANCISCO E
Address: 22293 MISTY WOOD WAY
City-St-Zip: BOCA RATON, FL 33428

Title: VPD (X) Change () Addition
Name: DE CASSE SA, RITA
Address: 22293 MISTY WOOD WAY
City-St-Zip: BOCA RATON, FL 33428

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: FRANCISCO E. VIANA

PD

05/25/2005

Electronic Signature of Signing Officer or Director

Date