2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000100531

MORALES, JAVIER

17555 ATLANTIC BLVD PH 8

SUNNY ISLES BEACH, FL 33160

Name:

Address:

City-St-Zip:

FILED Apr 29, 2007 Secretary of State

Entity Nai	me: NETLINE	COMMUNICATIONS CORP.			
Current Principal Place of Business:			New Principal Pl	New Principal Place of Business:	
2538 SW 30TH AVENUE HALLANDALE, FL 33009			520 BRICKELL KE 1403 MIAMI, FL 33131		
Current Mailing Address:			New Mailing Add	New Mailing Address:	
2538 SW 30TH AVENUE HALLANDALE, FL 33009			520 BRICKELL KE 1403 MIAMI, FL 33131		
FEI Number:	: 20-1343512	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addre	Name and Address of New Registered Agent:	
GATICA, MACARENA 2538 SW 30TH AVENUE HALLANDALE, FL 33009 US The above named entity submits this statement for the purpose of			520 BRICKELL KE 1403 MIAMI, FL 33131	MIAMI, FL 33131 US	
	e named entity s e of Florida.	ubmits this statement for the	purpose of changing its regis	stered office of registered agent, or both,	
SIGNATURE: NATHAN BERMAN				04/29/2007	
	Electroni	c Signature of Registered Ag	ent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BENDERSKY, J GERONIMO DE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BENDERSKY, D	678 DEPTO 1601	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BITRAN, CECILI AV. PRESIDENT	Delete A E KENNEDY 5230 ITIAGO DE CHILE,	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GATICA, MACAF 17555 ATLANTIC		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	DCEO (X)	Delete	Title:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: JOEL BENDERSKY D 04/29/2007