2005 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Apr 02, 2005 08:00 AM **Secretary of State** DOCUMENT # P97000085323 1. Entity Name SURELINE INVESTMENTS, INC. Principal Place of Business . Mailing Address 7905 EMBASSY BLVD 7905 EMBASSY BLVD MIRAMAR, FL 33023 MIRAMAR, FL 33023 01252005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0785671 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DAMES, WAYNE V DO NOT WRITE 7905 EMBASSY BLVD MIRAMAR, FL 33023 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PT TITLE NAME DAMES, WAYNE V STREET ADDRESS 7905 EMBASSY BLVD MIRAMAR, FL 33023 CITY-ST-ZIP TITLE PIERRE, RONALD NAME ___U00000285071 04/02/05-80029-019 150.00 STREET ADDRESS 445 NW 87 ST MIAMI, FL 33150 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-739

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachinght with an address, with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR