## 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

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## DOCUMENT # G78025 1. Entity Name FILED A-LINE INVESTMENT CORP. 04 JUL -7 PM 3: 11 Principal Place of Business Mailing Address SECRETARY OF STATE 704 XANADU PL 704 XANADU PL TALLAHASSEE. FLORIDA JUPITER FL 33477 JUPITER FL 33477 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 13-2690223 Not Applicable Zin Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BERK, JACK M. Street Address (P.O. Box Number is Not Acceptable) 704 XANADU PLACE JUPITER FL 33477 Zip Code 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. (NOTE: Registered Agent aignature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Make Check Payable to Florida Department of State. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition BERK, JAČK M. NAME NAME STREET ADDRESS 704 XANĂDŲ PLACE STREET ADDRESS CITY-ST-ZIP JUPITER FL 33477 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition BERK, CHRISTINE H. NAME NAME STREET ADDRESS 704 XANADU PLACE STREET ADDRESS JUPITER FL 33477 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete MILE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS

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 attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

Jack m. Berk SIGNATURE AND TYPED OR PRINTED MAJE OF SIGNING OFFICER OR DIRECTOR

## A-LINE INVESTMENT CORP. G78001-

704 XANADU PLACE • JUPITER, FLORIDA 33477 • 561-746-8685

June 27, 2004

Division of Corporations Annual Report Section P.O. Box 6850 Tallahassee, Fl. 32314

To whom it may concern:

On March 3<sup>rd</sup> I had a fever and began an illness that had me hospitalized on March 13, 2004. I had 3 major and 4 minor operations during March 15<sup>th</sup> and April 28. When I became an Outpatient, I received my intraveinous I.V.'s and wound care on the Hospital Campus.

I did not get my mail during all this time. I had decreased mental abilities and was seeing doctors and/or wound care daily until this past week.

I just got the annual report form yesterday and I am submitting it now.

Because of my great past paying record since 1984, I am hoping that you will forgive my penalty portion of the annual report fee.

Thank you.

Very truly yours,

Jack M. Berk

Enclosure: See bills from hospital stay.