

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H23621

FILED
Feb 19, 2008
Secretary of State

Entity Name: SHORELINE AIR SYSTEMS, INC.

Current Principal Place of Business:

3801 NW 49 ST
TAMARAC, FL 33309 US

New Principal Place of Business:

Current Mailing Address:

3801 NW 49 ST
TAMARAC, FL 33309 US

New Mailing Address:

FEI Number: 59-2447857 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RIST, THOMAS
510 SE 9TH AVE
POMPANO BCH, FL 33060 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RIST, THOMAS,
Address: 510 S.E. 9TH AVE.
City-St-Zip: POMPANO BEACH, FL 33060

Title: ST () Delete
Name: RIST, DALE
Address: 510 SE 9TH AVE
City-St-Zip: POMPANO BCH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: THOMAS RIST

P

02/19/2008

Electronic Signature of Signing Officer or Director

Date