

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010741

FILED
May 01, 2009
Secretary of State

Entity Name: BLUE LINE ENTERPRISES, INC.

Current Principal Place of Business:

2701 TARPON DRIVE
MIRAMAR, FL 33023

New Principal Place of Business:

Current Mailing Address:

2701 TARPON DRIVE
MIRAMAR, FL 33023

New Mailing Address:

FEI Number: 20-3395405 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ALLEN, SHARON
2701 TARPON DRIVE
MIRAMAR, FL 33023 US

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALLEN, SHARON
Address: 2701 TARPON DRIVE
City-St-Zip: MIRAMAR, FL 33023

Title: VD () Delete
Name: WILLIAMS, SHENIKA
Address: 5245 WHITSETT AVE
City-St-Zip: VALLEYVILLAGE, CA 90016 US

Title: S () Delete
Name: ALLEN, MARGO
Address: 2701 TARPON DRIVE
City-St-Zip: MIRAMAR, FL 33023 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHARON ALLEN

PD

05/01/2009

Electronic Signature of Signing Officer or Director

Date