## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

## FILED Mar 12, 2004 08:00 AM---**Secretary of State** DOCUMENT # P00000028505 FINE LINE DIGITAL, INC. Principal Place of Business Mailing Address 4720 OAKES RD 4720 OAKES RD STE D STE D DAVIE, FL 33314 DAVIE, FL 33314 03102004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1001552 Not Applicable **\$8.75** Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SACHS, MARTY 4720 OAKES RD DO NOT WRITE SUITE D IN THIS SPACE **DAVIE, FL 33314** 3. 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. Lam familiar with, and accept the obligations of regisfered agent. (NOTE: Registered Agent algnature required when reinstaling) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 3331E NAME SACHS, MARTY STREET ACCRESS 4720 OAKES RD D CITY-ST-78P **DAVIE, FL 33314** U00000086873 03/12/04-80041-010 150.00 13335 NAME STREET ADDRESS CATY-ST-71P TIFEE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZEP TILE NAME STREET ADDRESS CITY-ST-ZIP BILE MANE STITLET ADDRESS

12. I hereby certify that the information supplied with this filling 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attactiment/writh an address, with all other like empowered.

MAKTY