

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000067619

**FILED**  
**Jun 10, 2005**  
**Secretary of State**

**Entity Name:** TOP LINE SCREEN PRINTING AND EMBROIDERY, INC.

**Current Principal Place of Business:**

4210 L.B. MCLEOD ROAD  
#109  
ORLANDO, FL 32811

**New Principal Place of Business:**

**Current Mailing Address:**

4210 L.B. MCLEOD ROAD  
#109  
ORLANDO, FL 32811

**New Mailing Address:**

**FEI Number:** 59-3662602

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VARGAS, SARA L  
7020 HIAWASSEE OVERLOOK DRIVE  
ORLANDO, FL 32835 US

**Name and Address of New Registered Agent:**

VARGAS, SARA L  
1121 MISSION RIDGE COURT  
ORLANDO, FL 32835 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

06/10/2005

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: VARGAS, SARA LEE  
Address: 7020 HIAWASSEE OVERLOOK DR  
City-St-Zip: ORLANDO, FL 32835

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SARA LEE VARGAS

P

06/10/2005

Electronic Signature of Signing Officer or Director

Date