

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

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2006 JUL 12 PM 2:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2005

DOCUMENT # PD1000084159	
1. Entity Name HARBOR-LINE, INC	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2901 S MIAMI AVE		3. Mailing Address 2901 S MIAMI AVE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State MIAMI FL	City & State MIAMI FL	4. FEI Number 65-1134084	Applied For Not Applicable
Zip 33129	Country	Zip 33129	Country

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name CINDI SINCLAIR DE ROTHSCILD	
	Street Address (P.O. Box Number is Not Acceptable) 2901 S MIAMI AVE	
	City MIAMI	FL Zip Code 33129

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 *Cindi Sinclair de Rothschild* 5-11-06
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signatures required upon filing.) DATE

January 1 - May 1, Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CINDI SINCLAIR DE ROTHSCILD 2901 S MIAMI AVE MIAMI FL 33129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 319.07(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 on an attachment with an address with all other like empowered.

SIGNATURE: *Cindi Sinclair de Rothschild* 5-11-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

CR2E034B (12/02)

Pratt

**HARBOR-LINE, INC.
2901 S MIAMI AVENUE
MIAMI, FL 33129**

May 1st, 2006

Division of Corporations
Annual Report Section
P.O. Box 6327
Tallahassee, FL 32314

REF: DOCUMENT#: P01000084159

Dear Sir or Madam:

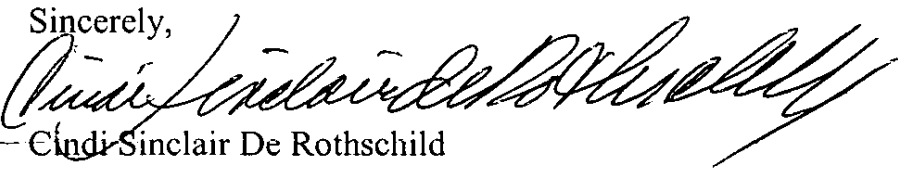
Please be advised that the above-mentioned corporation annual report was never received for timely submission.

Therefore, we are requesting that the delinquent fees be waived and that the corporation is allowed to submit a second annual report with the corresponding fee of \$ 150.00 each.

Please advise.

Your cooperation is appreciated.

Sincerely,



Cindi Sinclair De Rothschild