

2008 FOR PROFIT CORPORATION ANNUAL REPORT

pg 10fz

DOCUMENT # P0100095240.

1. Entity Name *Inline Leak Detection Inc*



FILED

09 FEB 17 PM 12:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
12316 St. Simon Drive *Sauil*
Boca Raton, FL 33428

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REINSTATEMENT 08-09
03262668 (11/05)

4. FEI Number Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Gladys Melendez
1520 South State Road 7
Hollywood, FL 33023

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IN THIS SPACE

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 *Gladys Melendez*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

01/09/2009
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fee

500140790035
01/15/09--01012--006 **150.00

10. OFFICERS AND DIRECTORS

TITLE *DP*
NAME *Alvarez, Efraim B.*
STREET ADDRESS *12316 St Simon Drive*
CITY-ST-ZIP *Boca Raton, FL 33428*

TITLE
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500140790035
02/17/09--01005--015 **158.75

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IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/12/2009
Date

Daytime Phone #

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**INLINE LEAK DETECTION INC
12316 ST SIMON DRIVE
BOCA RATON FL 33428**

1/12/2009

**Florida Department of State
Division of Corporations
P.O. Box 78800
Tallahassee, FL 32314**

**Reference: Annual Report
INLINE LEAK DETECTION
Document # P01000095240**

Enclosed is a check for \$150.00 in order to pay for the
2008 annual report.

This Form was not filed before because the Officer never received
the blank form in the mail.

Please accept our request for the year 2008.


**Efrain Alvarez
President**