## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 15, 2006 8:00 am Secretary of State

	AIIIIVALI	TEI OITI			ary or source
1. Entity Nam	OCUMENT # P01000119280 Entity Name INE-LINE FABRICS, INC.				90040 004 ***150.00
Principal Plac 8925 NW 26 MIAMI, FL 3	STREET	Mailing Address 8925 NW 26 STREET MIAMI, FL 33172		4002enna	
2. Principal P	Tace of Business	3. Mailing Address	. 29th A		
Suite, Apt. #, etc. Suite, Apt. #, etc.				04202006 Chg-P	CR2E034 (11/05)
City Stat	Auri, FloriDA	City's State	TL.	4. FEI Number 01-0554740	Applied For Not Applicable
<sup>Zip</sup> 3/	27 Country SA	33/27	Country C. A	5. Certificate of Status Desired	\$8.75 Additional Fee Required
Name				7. Name and Address of New Re	·
DINER, MANUEL 141 NE 3 AVE STE 601 MIAMI, FL 33132			Street Address	(P.O. Box Number is Not Acceptable)	NEN
			772	5 N.W. 146	the 300
			City V	Ami LAKES	FL Zip Sta 0 1/6
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					
			5.00 May Be ded to Fees		
10	OFFICERS AND DIRECTORS 11.		11.	ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS IN 11
TITLE	D i	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	GROBLER, SERGIO		NAME		
STREET ADDRESS CITY-ST-ZIP	8925 NW 26-STREET		STREET ADDRESS		
	MIAMI, FL 33172		CITY-ST-ZIP	THE STATE OF THE S	
TITLE NAME		☐ Delete	TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TM E		☐ Delete	TITLE		Change
NAME		L Delete			☐ Change ☐ Addition ↓
STREET ADDRESS		·	NAME	<del>.</del>	Addition !
			NAME STREET ADDRESS	w.	Change - Addition :
CITY-SI-ZIP			NAME STREET ADDRESS CITY-ST-ZIP	<del>.</del>	<u> </u>
CITY-ST-ZIP		Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE		Change Addition
CITY-SI-ZIP			NAME STREET ADDRESS CITY-ST-ZIP	<del></del>	<u> </u>
CITY-SI-ZIP TITLE NAME			NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		<u> </u>
CITY-SI-ZIP  TITLE  NAME  SIREET ADDRESS			NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		<u> </u>
CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	·	Change Addition
CITY-SI-ZIP  TITLE NAME SIREET ADDRESS CITY-SI-ZIP  TITLE NAME SIREET ADDRESS		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		Change Addition
CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	-	Change Addition
CITY-SI-ZIP  TITLE NAME SIREET ADDRESS CITY-SI-ZIP  TITLE NAME SIREET ADDRESS		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		Change Addition

12. Thereby certify that the information supplied with this filling 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 at other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED ON TRINTED HAME OF SIGNING OFFICER OR DIRECTOR

05-01-06

30-576-7674 Daytime Phone #

## #10092006 #10092006

FINE LINE FABRICS INC.

109 NW 29th STREET MIAMI FL 33127 РН (305) 576-7674

DATE: 05-11-06

TO: Division of Corporations

Att: Annual Report Pillings

E.I.N#01-0554740

FROM: SERGIO GROBLER

DEAR SIR MOLE:
AS YOU CAN SER IN the ENCLOSED

Corporation ANNUAR REPORT FOR 2006

OUR BUSINESS ADNESS AND the Recistered

ABENTS Were Both incoirrect.

We received the Renewal Downers AFTER MAY, 127 2006.

We respectfully request, penalty For late Filling be Waived.

Sincenty, Sensio Gnoblem Pres.