2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000059775

Entity Name: BEE-LINE ALIGNMENT SERVICE, INC.

FILED Jan 14, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1614 W GARDEN ST PENSACOLA, FL 32501 1614 W GARDEN ST PENSACOLA, FL 32502

Current Mailing Address: New Mailing Address:

1614 W GARDEN ST1614 W GARDEN STPENSACOLA, FL 32501PENSACOLA, FL 32502

FEI Number: 38-3652248 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LE, THOI V
1614 W GARDEN ST
PENSACOLA, FL 32501 US

LE, THOI V
1614 W GARDEN ST
PENSACOLA, FL 32502 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: 01/14/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: PD (X) Change () Addition

Name: LE, THOI V Name: LE, THOI V

 Address:
 1614 W GARDEN ST
 Address:
 1614 W GARDEN ST

 City-St-Zip:
 PENSACOLA, FL 32501
 City-St-Zip:
 PENSACOLA, FL 32502

Name: LE, KIM Y Name: LE, KIM Y

 Address:
 1614 W GARDEN ST
 Address:
 1614 W GARDEN ST

 City-St-Zip:
 PENSACOLA, FL 32501
 City-St-Zip:
 PENSACOLA, FL 32502

Title: D () Delete Title: D (X) Change () Addition

 Name:
 NGUYEN, YEN-VI
 Name:
 NGUYEN, YEN-VI

 Address:
 3410 MILLCREST DR
 Address:
 1614 W GARDEN ST

 City-St-Zip:
 JACKSONVILLE, FL 32277
 City-St-Zip:
 PENSACOLA, FL 32502

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: THOIVLE PRES 01/14/2009