2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 10, 2005 08:00 AM Secretary of State

| DOCUMENT # P02000068356 1. Enlity Name BULK LINES, INC. | | | Secretary of State | |
|--|--|---|---|--|
| 12164 TAM | | Mailing Address 12164 TAMIAMI TRAIL PUNTA GORDA, FL 33955 | | |
| DO NOT WRITE IN THIS SPACE. 6. Name and Address of Current Registered Agent | | | CE | 01112005 No Chg-P CR2E034 (10/03) 4. FEI Number |
| YOUNG, JERRY T 12164 TAMIAMI TRAIL PUNTA GORDA, FL 33955 | | | MATTERIORIS COLLEGE VI de la 1 1 1 7 7 10 7 700 | DO NOT WRITE 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE | | | | |
| FIL After Ma | E NOW!!! FEE I\$ \$150.00 ay 1, 2005 Fee will be \$550.00 | S. Election Campaign Finar Trust Fund Contribution. | | 5.00 May Be ded to Fees |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | OFFICERS AND DIRI PTVS YOUNG, JERRY T 12164 TAMIAMI TRAIL PUNTA GORDA, FL 33955 D YOUNG, JERRY T 12164 TAMIAMI TRAIL PUNTA GORDA, FL 33955 | CTORS | | U00000258641 03/10/05-80045-025 150.00 |
| NAME STREET AUDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP | AME IREET ADDRESS IY-SI-ZIP ILE AME REET ADDRESS | | DO NOT WRITE IN THIS SPACE | |
| NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS | | | - W. | |
| 12. It hereby certify that the information supplied with this filing does not qualify 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 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. | | | | |