

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000132062

Entity Name: LASER LINE, INC.

FILED
Feb 12, 2007
Secretary of State

Current Principal Place of Business:

520 WEXDON COURT
LAKE MARY, FL 32746 US

New Principal Place of Business:

306 RYDER LANE
SUITE 1200
CASSELBERRY, FL 32707 US

Current Mailing Address:

520 WEXDON COURT
LAKE MARY, FL 32746 US

New Mailing Address:

306 RYDER LANE
SUITE 1200
CASSELBERRY, FL 32707 US

FEI Number: 20-0391794

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNCAN, ARDIE L
520 WEXDON COURT
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

DUNCAN, ARDIE L
306 RYDER LANE
SUITE 1200
CASSELBERRY, FL 32707 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: ARDIE L. DUNCAN

02/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: DUNCAN, ARDIE L
Address: 520 WEXDON COURT
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: DUNCAN, ARDIE L
Address: 306 RYDER LANE SUITE 1200
City-St-Zip: CASSELBERRY, FL 32707

I hereby certify that the information supplied with this filing does not qualify for the 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: ARDIE L. DUNCAN

PSD

02/12/2007

Electronic Signature of Signing Officer or Director

Date