2006 FOR PROFIL CORPORATION **ANNUAL REPORT**

DOCUMENT # P04000092318

1. Entity Name TIME ON LINE CORPORATION



Principal Place of Business

7615 BANYAN WAY TAMARAC, FL 33321 Mailing Address 7615 BANYAN WAY TAMARAC, FL 33321

FILED Apr 03, 2006 8:00 am Secretary of State

04-03-2006 90375 033 ***150.00

60024292



DO NOT WRITE IN THIS SPACE

03222006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2542179

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PIATT, MARK A 7615 BANYAN WAY TAMARAC, FL 33321

DO NOT WRITE IN THIS SPACE

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	e named entity submits this statement for the plans of registered agent.	ourpose of changing its register	ed office or	registered agent, or bott	n, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and little	d anniente (NOTE: Conience	d Appel signatur	e required when reinstating)	DATE
	Signalure, typed or printed name of registered agent and little	rappicable. INC/E: Registere	o Ageni signatur	a technien wish temperating)	DAILS.
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.			ncing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS		·	
TITLE	P				
NAME	PIATT, MARK A				
STREET ADDRESS	7615 BANYAN WAY				
CITY-ST-ZIP	TAMARAC, FL 33321				
TITLE	VP				
NAME	RODRIGUEZ-PIATT, JULIETTE M				
STREET ADDRESS	7615 BANYAN WAY			\mathcal{A}_{2}^{+} :	
CITY-ST-ZIP	TAMARAC, FL 33321		340		
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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 all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP