2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Sep 08, 2005 8:00 am Secretary of State

ANNUAL REPURI				>	Secretary of State			
DOCUMENT # P04000120961						0068 005 ***558.		
1. Entity Nam BLUE LIN	e IE FINANCIAL, INC							
Principal Plac	e of Business	Mailing Address			. 1	raaceeae		
1320 15TH STREET #1		1320 15TH STREET #1			50065596			
MIAMI BEACH	I, FL 33139	MIAMI BEACH, FL 33139						
		3. Mailing Address						
	lace of Business LITTLE RIVER DRIVE	ERVERD						
Suite, Apt.	#, etc.		08182005	Chg-P	CR2E034 (10/03)			
City & State	e	City & State	 	4. FEI Numbe	er _	Aı	oplied For	
MIAMI	FLORIDA		RIDA	51-0	52627		ot Applicable	
33157	Country USA MIAMI - DADE	33 150	Country	5. Certificate	of Status Desired	\$8.75 Add Fee Require		
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name								
YACOUB, AMANI				YACONB	- FMF	WI		
1320 15TH	I STREET #1 ACH, FL 33139	Street Add	ress (P.O. Box Numb	er is Not Acceptabl	R DRIVE			
IVIIAIVII DE	40H, FE 33139							
CityMIAMI				MI		FL Zingo	¹⁶ 50	
The above named entity adpmits this statement for the purpose of changing its registered office or registered the obligations of registered agent.					th, in the State of Fl			
(Mariani Caral (Mariani (Mariani) 4 20 00								
SIGNATURE	Signature, typed or printed name of register to agent at	nd title (applicable, (NOTE: Re	egistered Agent signature	regified when reinstating)	(2)	DATE DATE		
FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be								
Due by September 7, 2005 Trust Fund Contribution			·	Added to Fees				
10. ,	OFFICERS AND I	DIRECTORS	11.	ADDITIONS,	CHANGES TO OF	FICERS AND DIRECTOR	S IN 11	
TITLE	P VACCUID ANAANII	☐ Delete	TITLE			☐ Change	☐ Addition	
NAME STREET ADDRESS	YACOUB, AMANI 1320 15TH STREET #1		NAME STREET ADDRESS					
CITY-ST-ZIP	MIAMI BEACH, FL 33139		CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Change	Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS					
CITY+ST-ZIP			CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Change	Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition	
NAME STREET ADDRESS			NAME Street address					
CITY_CT_7ID			DITY OF TIE					

12. I hereby certify that the information supplied with this filling 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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

8-27-05

9300

☐ Change

■ Addition

ATTACHMENT 50065596

P04000120961 A
BLUE LINE FINANCIAL, INC
1151 NW LITTLE RIVER DR
MIAMI FL 33139

To whom it may concern, This is a formal letter. I an requesting a waiver of 400. = Sate fee because My home, and office moved to 1151 Little River Drive Manne Florida 33150. I did NOT Recure this uptil 8-27-05 Then we had a Huricane Katrinei. Comphelp W/this matter would be greatly appriented. Thank you, among Jacout.