

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 27, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # P05000013222

1. Entity Name  
TIGHT LINES GROUP, INC., I



Principal Place of Business  
5151 COLLINS AVE #623  
MIAMI, FL 33134

Mailing Address  
5151 COLLINS AVE #623  
MIAMI, FL 33134



03182008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
NOT APPLICABLE

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

BELLO, LUIS  
5161 COLLINS AVE #1402  
MIAMI BEACH, FL 33140

**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

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

U00000870897  
04/09/08-80110-009 150.00

**10. OFFICERS AND DIRECTORS**

|                |                          |
|----------------|--------------------------|
| TITLE          | D                        |
| NAME           | BELLO, LUIS              |
| STREET ADDRESS | 1561 COLLINS AVE #1402   |
| CITY-ST-ZIP    | MIAMI BEACH, FL 33140    |
| TITLE          | S                        |
| NAME           | HERA, LINO DE LA         |
| STREET ADDRESS | 4781 NW 72ND AVE.        |
| CITY-ST-ZIP    | MIAMI, FL 33176          |
| TITLE          | T                        |
| NAME           | FIGUERAS, LOUIS          |
| STREET ADDRESS | 5151 COLLINS AVE. #623   |
| CITY-ST-ZIP    | MIAMI BEACH, FL 33140    |
| TITLE          | VP                       |
| NAME           | MIGUEL, MARTIN           |
| STREET ADDRESS | 11011W. FLAGLER ST. #704 |
| CITY-ST-ZIP    | MIAMI, FL 33134          |
| TITLE          |                          |
| NAME           |                          |
| STREET ADDRESS |                          |
| CITY-ST-ZIP    |                          |
| TITLE          |                          |
| NAME           |                          |
| STREET ADDRESS |                          |
| CITY-ST-ZIP    |                          |

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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:

*Louis Figueras* CPA.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-2008

Date

Daytime Phone #