2007 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT Mar 12, 2007 08:00 AM Secretary of State **DOCUMENT # P05000102202** FINE LINE IMPORTERS, INC. Principal Place of Business Mailing Address 83 SW 8TH ST 83 SW 8TH ST MIAMI, FL 33130 MIAMI, FL 33130 CR2E034 (11/05) 01162007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 90-0097871 Not Applicable \$8,75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LAVIN, ALEXANDRE DO NOT WRITE **83 SW 8TH ST** MIAMI, FL 33130 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 little if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE LAVIN, ALEXANDRE NAME 83 SW 8TH ST STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33130 U00000663404 03/22/07-80002-024 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby 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 Geliver 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:

STREET ADDRESS

MEXAUDRE LAUIN.

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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