

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000104638

FILED
Apr 07, 2009
Secretary of State

Entity Name: HUSTLELINE ENTERTAINMENT, INC.

Current Principal Place of Business:

850 IVES DAIRY RD T-57
518
NORTH MIAMI BEACH, FL 33179

New Principal Place of Business:

Current Mailing Address:

850 IVES DAIRY RD T-57
518
NORTH MIAMI BEACH, FL 33179

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANIELS, ANTWAN
1146 NW 103 STREET
MIAMI, FL 33150 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: URRRA, EMMANUEL
Address: 4750 N.W. 169TH STREET
City-St-Zip: CAROL CITY, FL 33055

Title: P () Delete
Name: DANIELS, ANTWAN T
Address: 850 IVES DAIRY RD T-57 518
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: T () Delete
Name: BANKS, SIRENA K
Address: 850 IVES DAIRY RD T-57 518
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: A&R () Delete
Name: ALLEYNE, PAUL
Address: 850 IVES DAIRY RD T-57 518
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: A&R () Delete
Name: IZARD, DANTE
Address: 850 IVES DAIRY RD T-57 518
City-St-Zip: NORTH MIAMI BEACH, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ANTWAN DANIELS

P

04/07/2009

Electronic Signature of Signing Officer or Director

_____ Date