

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000140778

Entity Name: YMC LINES CORP

FILED
May 02, 2008
Secretary of State

Current Principal Place of Business:

955 SW 71 CT
MIAMI, FL 33144

New Principal Place of Business:

438 NE MAINSAL ST
PORT SAINT LUCIE, FL 33144

Current Mailing Address:

955 SW 71 CT
MIAMI, FL 33144

New Mailing Address:

438 NE MAINSAL ST
PORT SAINT LUCIE, FL 33144

FEI Number: 20-5850311

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPO, YOSVANY
955 SW 71 CT
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

CAMPO, YOSVANY
438 NE MAINSAIL ST
PORT SAINT LUCIE, FL 34983 US

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:

05/02/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CAMPO, YOSVANY
Address: 955 SW 71 CT
City-St-Zip: MIAMI, FL 33144 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CAMPO, YOSVANY
Address: 438 NE MAINSAIL ST
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

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: YOSVANY CAMPO

CEO

05/02/2008

Electronic Signature of Signing Officer or Director

Date