## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000125447

Entity Name: OCEAN LINES, CORP.

City-St-Zip:

FILED Jan 09, 2008 Secretary of State

|   |  | in veo, cora .                   |  |  |                                   |  |
|---|--|----------------------------------|--|--|-----------------------------------|--|
| Current P                                   | rincipal Place   | of Business:                     | New Princ  | New Principal Place of Business:                               |                                   |  |
| 10720 NW<br>MIAMI, FL                       | 66 ST., #505<br>33178                                    |                                  | 10720 NW<br>505<br>MIAMI, FL   | ,  |                                   |  |
| Current M                                   | lailing Addres   | ss:                              | New Maili  | New Mailing Address:   |                                   |  |
| 10720 NW<br>MIAMI, FL                       | 66 ST., #505<br>33178                                    |                                  | 14833 SW<br>204<br>MIAMI, FL   |  |                                   |  |
| FEI Number:                                 | : 26-1448447   | FEI Number Applied For ( )       | FEI Number Not App   | licable ( )  | Certificate of Status Desired ( ) |  |
| Name and                                    | Address of C   | Current Registered Agent:        | Name and   | Name and Address of New Registered Agent:                      |                                   |  |
| MIAMI, FL                                   | 66 ST., #505<br>33178 US                                 |                                  | o de la composición dela composición de la composición dela composición de la composición de la composición dela composición dela composición de la composic | :h   | "                                 |  |
|   | e named entity :<br>e of Florida.                        | submits this statement for the p | purpose of changing i  | ts registered on   | ice or registered agent, or both, |  |
| SIGNATUR                                    | RE:  |                                  |  |  |                                   |  |
|   |  | nic Signature of Registered Ag   | ent  |  | Date                              |  |
| Election Car                                | mpaign Financin  | g Trust Fund Contribution ( ).   |  |  |                                   |  |
| OFFICERS AND DIRECTORS:                     |  |                                  | ADDITION   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS                    |                                   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | P ( )<br>LYON, SERGIO<br>10720 NW 66 S<br>MIAMI, FL 331  | ST., #505                        | Title:<br>Name:<br>Address:<br>City-St-Zip:  | ()   | Change ( ) Addition               |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | S ( )<br>VALLEJO, JOR<br>10720 NW 66 S<br>MIAMI, FL 331  | ST., #505                        | Title:<br>Name:<br>Address:<br>City-St-Zip:  | S (X) (REIMY, MIGUEL<br>10720 NW 66 ST<br>MIAMI, FL 3317       | T., <b>#</b> 505                  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | VP ( )<br>PENA, ALVARO<br>10720 NW 66 S<br>MIAMI, FL 331 | ST., #505                        | Title:<br>Name:<br>Address:<br>City-St-Zip:  | VP (X) 0<br>PENA, ALVARO I<br>10720 NW 66 ST<br>MIAMI, FL 3317 | T., <b>#</b> 505                  |  |
| Title:<br>Name:                             | ( )  | ) Delete                         | Title:<br>Name:  | AD ()(CEDENO, DEIBY  |                                   |  |

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.

City-St-Zip:

MIAMI, FL 33178

SIGNATURE: ALVARO PENA VP 01/09/2008