2009 FOR PROFIT CORPORATION ANNUAL REPORT

Electronic Signature of Registered Agent

DOCUMENT# P07000125447

Entity Name: OCEAN LINES, CORP.

FILED Jan 07, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of I	New Principal Place of Business:	
10720 NW 66 ST., 505 MIAMI, FL 33178		14833 SW 80 TH ST 204 MIAMI, FL 33193		
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
14833 SW 80 TH ST 204 MIAMI, FL 33193 FEI Number: 26-1448447	FEI Number Applied For()	FEI Number Not Applicable()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of N	Name and Address of New Registered Agent:	
LYON, SERGIO 10720 NW 66 ST., #505 MIAMI, FL 33178 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.				

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

SIGNATURE:

 Title:
 P
 () Delete

 Name:
 LYON, SERGIO

 Address:
 10720 NW 66 ST., #505

 City-St-Zip:
 MIAMI, FL 33178

Title: S () Delete
Name: REIMY, MIGUEL A

Address: 10720 NW 66 ST., #505 City-St-Zip: MIAMI, FL 33178

Title: VP () Delete
Name: PENA, ALVARO E
Address: 10720 NW 66 ST., #505
City-St-Zip: MIAMI, FL 33178

 Title:
 AD
 (X) Delete

 Name:
 CEDENO, DEIBYS

 Address:
 10720 NW 66 ST # 505

 City-St-Zip:
 MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: P (X) Change () Addition

Name: PENA, ALVARO E

Address: 14833 SW 80 TH ST APT-204

City-St-Zip: MIAMI, FL 33193

Title: S (X) Change () Addition

Name: PENA, ALVARO E

Address: 14833 SW 80 TH ST APT-204

City-St-Zip: MIAMI, FL 33193

Title: VP (X) Change () Addition

Name: CEDENO, DEIBYS A Address: 14833 SW 80 TH ST APT-204

City-St-Zip: MIAMI, FL 33193

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: ALVARO PENA P 01/07/2009