

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P31802

FILED
Feb 28, 2007
Secretary of State

Entity Name: AMERICAN MULTILINE CORPORATION

Current Principal Place of Business:

13760 NOEL RD
SUITE 340
DALLAS, TX 75240 US

New Principal Place of Business:

Current Mailing Address:

13760 NOEL RD
SUITE 340
DALLAS, TX 75240 US

New Mailing Address:

FEI Number: 95-4052906

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PSDT () Delete
Name: TAYLOR, JOHN E.,
Address: 13760 NOEL RD., #340
City-St-Zip: DALLAS, TX 75240

Title: VD () Delete
Name: NICOLA, SUSAN A.,
Address: 11620 WILSHIRE BLVD, STE 500
City-St-Zip: LOS ANGELES, CA 90025

Title: V () Delete
Name: GERAGHTY, DONNA
Address: 245 BEAVER DAM RD
City-St-Zip: ISLIP TERRACE, NY

Title: VD () Delete
Name: ROBINSON, HUGH
Address: 13760 NOEL RD., #340
City-St-Zip: DALLAS, TX

Title: V () Delete
Name: MACKENZIE, BONNIE
Address: 5000 QUORUM DR, STE 440
City-St-Zip: DALLAS, TX 75254

Title: V () Delete
Name: MANAS, FRANK
Address: 2 MID AMERICA PLAXA
City-St-Zip: OAKBROOK TERRACE, IL 60181

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:

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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 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: HUGH ROBINSON

VP

02/28/2007

Electronic Signature of Signing Officer or Director

Date