


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2005 8:00 am**  
**Secretary of State**

04-18-2005 90324 003 \*\*\*150.00

<b>DOCUMENT # P93000017332</b> 1. Entity Name <b>INLINE TELECOM, INC.</b>			
Principal Place of Business <b>8000 SEMINOLE BLVD. SUITE 1 SEMINOLE, FL 33772 US</b>		Mailing Address <b>8000 SEMINOLE BLVD. SUITE 1 SEMINOLE, FL 33772 US</b>	
2. Principal Place of Business <b>- 8000 SEMINOLE BLVD. SUITE 5 SEMINOLE, FL</b>		3. Mailing Address <b>8000 SEMINOLE BLVD SUITE 5 SEMINOLE, FL</b>	
City & State <b>SEMINOLE, FL</b>		City & State <b>SEMINOLE, FL</b>	
Zip <b>33772</b>	Country <b>USA</b>	Zip <b>33772</b>	Country <b>USA</b>
4. FEI Number <b>59-3169298</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>KERBO, GARY W 14261 82 TERR N. SEMINOLE, FL 33776</b>		7. Name and Address of New Registered Agent Name <b>GARY KERBO</b> Street Address (P.O. Box Number is Not Acceptable) <b>9731 TAYLOR ROSE LANE</b> City <b>LARGO</b> FL Zip Code <b>33777</b>	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u><i>Gary W Kerbo</i></u> DATE: <u>4/15/05</u> <small>(Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent's signature required when resigning))</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KERBO GARY W 14261 82 TERR N SEMINOLE, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GARY KERBO 9731 TAYLOR ROSE LN LARGO, FL 33777
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KERBO ANTHONY 12800 VONN ROAD LARGO, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KERBO, ANTHONY 13829 SUNSET DR. LARGO, FL 33774-4522
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KERBO MARK 10343 JENNIFER CT LARGO, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KERBO MARK 3349 HYDE PARK DR. CLEARWATER, FL 33761
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u><i>Mark Kerbo</i></u> <b>MARK KERBO</b> DATE: <u>4/15/05</u>		727-319-8706	