

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000054932

Entity Name: SYSTEM LINE CO.

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

8442 NW 72ND STREET  
MIAMI, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

8442 NW 72ND STREET  
MIAMI, FL 33166

**New Mailing Address:**

FEI Number: 65-0435234

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FREIRE, RAFAEL  
8442 NW 72ND STREET  
MIAMI, FL 33166 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

**OFFICERS AND DIRECTORS:**

Title: VD  
Name: FREIRE, RAFAEL  
Address: 8442 NW 72 STREET  
City-St-Zip: MIAMI, FL 33166

Title: PD  
Name: FREIRE, RAFAEL  
Address: 8442 NW 72ND STREET  
City-St-Zip: MIAMI, FL 33166

I hereby 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 all other like empowered.

SIGNATURE: RAFAEL FREIRE

PD

01/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date