2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000037228

4906 33RD AVENUE NORTH

ST. PETERSBURG, FL 33710

Address: City-St-Zip:

Entity Name: CLINE-LO CORP.

FILED Apr 30, 2006 Secretary of State

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Current P	rincipal Plac	e of Business:	New Principal Place of Business:		
	D AVE. NORT RSBURG, FL				
Current Mailing Address:			New Mailing Address:		
	D AVE. NORT RSBURG, FL				
FEI Number	: 59-3254014	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
ST. PETE	D AVENUE NO RSBURG, FL	33713 US			
	enamed entity e of Florida.	submits this statement for the p	ourpose of changing its registered	I office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	HAIRE, JERRY 4907 33RD TE		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	HAIRE, CYNTH 4906 33RD AV		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	P (LOWE, ELIZAI) Delete BETH	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: ELIZABETH LOWE PRES 04/30/2006