FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham,

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000081286 (2)

THE PASE LINE INC

Principal Plac 1388 NW 78 AI MIAMI FL 3312	VĒ	Mailing Address 1368 NW 78 AVE MIAMI FL 33126-1606			
				3. Date Incorporated or Qualified 3a. 10/01/1996	Date of Last Report
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0700908	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	е	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Ζ(p 24	Country 25	Ζφ 29	Country 30	8. This corporation has liability for intang Florida Statutes ☐ Yes	
24	9. Name and Address of Cur		[30]	10. Name and Address of New Register	
1368	DONALD, DAN B NW 78 AVE MI FL 33126		82 Street A 7 3 6	ANS BOS Miess P.O. Box Nymigar is Not Acceptable) 7 8 16 AVE	
			84 /1/	a <i>mi</i> F	L 85 3,000 6
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am the aid respect to the obligations of Section 607.0505, Florida Statutes. SIGNATURE Turns 1805 MANS 305.					
	<u> </u>	,	E: Registered Agent signature r		E /
12.	UFFICERS	AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	S X Change Addition
NAME	r	Land Describ	1.2 NAME	Mans 1905 - 12 1	-
STREET ADORESS			1.3 STREET ADDRESS	1368 NW 78" AU	6
				miami, F1 33126	S
CITY-ST ZIF		DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
C-TY - ST- 7IP			2. 4 City-St-ZiP		
TOTLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		• •
STREET ADDRESS			3.3 STREET ADDRESS		
CiTY - SY - ZiP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE	······································	Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
			4.4 CITY - ST - ZIP		
CITY - ST - ZIP TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME		La occur	5.2 NAME		
STREET ADDRESS			5.3 STREET ADORESS		
CHTY - \$1 - ZHP		DELETE	5.4 CITY - ST - ZIP		Change Addition
TITLE	1	F DETECT.	611ITLE		The Anguille The Vocation:

62 NAME

63 STREET ADDRESS 64 CITY-ST-ZIP 14. I do 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 into dated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under path; 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 12 or Block 12 or Block 12 or on an attachment with an address.

SIGNATU

NAME

STREET ADDRESS

FILED

Feb 06 1997 8:00am

Secretary of State