

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000038973

FILED
Apr 15, 2008
Secretary of State

Entity Name: MASTER LINE AGENCIES, INC.

Current Principal Place of Business:

2258 N.W. 82ND AVENUE
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

2258 N.W. 82ND AVENUE
MIAMI, FL 33122

New Mailing Address:

FEI Number: 65-0749558

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALAZAR MOORE, HENRY
8557 N.W. 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ESQUIVEL, NANCY M
Address: 15991 S.W. 96 TERRACE
City-St-Zip: MIAMI, FL 33196

Title: D () Delete
Name: SALAZAR MOURE, HENRY
Address: 8557 N.W. 72ND STREET
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ESQUIVEL, JUAN C
Address: 15402 S.W. 8TH LANE
City-St-Zip: MIAMI, FL 33194

Title: P (X) Change () Addition
Name: EBERTH, BORRERO
Address: 14230 S.W. 57TH AVENUE
City-St-Zip: MIAMI, FL 33183

I hereby certify that the information supplied with this filing does not qualify 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: JUAN C ESQUIVEL

D

04/15/2008

Electronic Signature of Signing Officer or Director

Date