

2007 FOR PROFIT CORPORATION ANNUAL REPORT

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Jan 16, 2007 8:00 am
Secretary of State

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01092007 No Chg-P CR2E034 (11/05)

DOCUMENT # P98000034166
 1. Entity Name
 AMERICAN IN-LINE INSPECTION SERVICE, INC.



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| Principal Place of Business 714 W BLUE SPRINGS AVE ORANGE CITY, FL 32763 | Mailing Address 714 W BLUE SPRINGS AVE ORANGE CITY, FL 32763 |
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DO NOT WRITE IN THIS SPACE

| | |
|--|-------------------------------|
| 4. FEI Number 59-3509291 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent
 WHIGHAM, FRANK C
 200 W FIRST ST
 SANFORD, FL 32771

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D VALLANCE, ROBIN J 714 W BLUE SPRINGS AVE ORANGE CITY, FL 32763 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Robin J. Vallance **Robin J. Vallance** 1-11-07 386-774-5589
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #