2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000058637

1. Entity Name

TIGHT LINES HOLDINGS CORPORATION



FILED Apr 16, 2007 08:00 A Secretary of State

CR2E034 (11/05)

Principal Place of Business

234 N.E. 5TH AVE. DELRAY BEACH, FL 33483 Mailing Address

C/O SIDNEY FRIEDMAN, CURATOR 3388 OCEAN HARBOR DRIVE OCEANSIDE, NY 11572



DO NOT WRITE IN THIS SPACE 04112007

4. FEI Number Applied For 65-0934802 Not Applied be

5. Certificate of Status Desired Fee Required

No Chg-P

6. Name and Address of Current Registered Agent

GRANT, FREDERICK R CPA 601 N.CONGRESS AVENUE SUITE #425 DELRAY BEACH, FL 33445			DO NOT WRITE IN THIS SPACE		
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered			J Agent signature required when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	000000708303 04/24/07-80111-001 150	. 00
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT PD SIDNEY FRIEDMAN, CURATOR 3388 OCEAN HARBOR DRIVE OCEANSIDE, NY 11572	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,		
IITLE NAME STREET ADDRESS CITY-ST-ZIP				NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,		Ż		
TITLE .					

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:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNIN

) DINEY FRIEDMAN 4/10/07

516/817-4406

Daytime Phone #