2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S04888

Address:

City-St-Zip:

8787 SW 107 ST

MIAMI, FL 33176

Entity Name: NIGHTLINE, INC.

FILED Mar 17, 2005 Secretary of State

	er monnen	VL , 11 V C.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
8787 SW [*] MIAMI, FL					
Current Mailing Address:			New Mailing Address:		
8787 SW ⁻ MIAMI, FL					
FEI Number	: 65-0221803	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
8787 SW MIAMI, FL	33176 US named entity s		ourpose of changing its registered	d office or registered agent, or both,	
	e of Florida. 				
SIGNATUI		ic Signature of Registered Age	ont .	 Date	
Election Car		g Trust Fund Contribution ().	ent.	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () LOPEZ DE LA (8787 SW 107 S MIAMI, FL 331	ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () MCANARNEY, 0 8770 SW 107 S MIAMI, FL 331	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D () GRASHEIM, LE	Delete E	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHARLES A. MCANARNEY MR. 03/17/2005