FILED
Mar 10, 2003 8:00 am
Secretary of State
02-24-2003 90962 045 ***158.75

00014004

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000034020

1. Entity Name
PINKGARDEN CORP.

Principal Place of Business
3915 MERIDIAN AVE.
SUITE 2
MIAMI BEACH, FL 33140

Mailing Address
3915 MERIDIAN AVE.
SUITE 2
MIAMI BEACH, FL 33140

2. Principal Place of Business
1304 NE 125 st
Suite, Apt. #, etc.
City & State
NORTH MIAMI, FL 33161
Zip 33161 Country U.S.

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 46-0475818 Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
ABRAMSON, EDWARD J ESQ.
7270 N.W. 12TH STREET
SUITE 580
MIAMI, FL 33126

DEPARTME

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 Gustavo Laglaive
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when eliminating) DATE 02/17/03

FILE NOWITH FEE: $ $150.00
After May 1, 2003 Fee Will be $350.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE PD NAME LAGLAIVE, GUSTAVO F STREET ADDRESS 3916 MERIDIAN AVE. CITY-ST-ZIP MIAMI BEACH, FL 33140	☐ Delete
TITLE VD NAME GIANESE, EDUARDO D STREET ADDRESS 3915 MERIDIAN AVE. CITY-ST-ZIP MIAMI BEACH, FL 33140	☐ Delete
TITLE SD NAME NECTOR, HUGO L STREET ADDRESS 3915 MERIDIAN AVE. CITY-ST-ZIP MIAMI BEACH, FL 33140	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE SD NAME BLANCA GAEHRING STREET ADDRESS 1304 NE 125 st CITY-ST-ZIP NORTH MIAMI, FL 33161	☒ Change ☐ Addition SS 263-83-9677
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/02)

12. I 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 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: Gustavo Laglaive PD 02/17/03 305-300-8300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #