

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000009583

**Entity Name:** PINKY PROMISES, INC.

**Current Principal Place of Business:**

10667 BRIGHTMAN BLVD.  
8303  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

10667 BRIGHTMAN BLVD.  
8303  
JACKSONVILLE, FL 32246 US

**FEI Number:** 27-2888013

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

MAROLT, AMIKCO  
10667 BRIGHTMAN BLVD.  
8303  
JACKSONVILLE, FL 32246 US

*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

**Officer/Director Detail :**

Title P  
Name BUTTS, LAKAYA  
Address 103 NW VENICE GLN  
City-State-Zip: LAKE CITY FL 32055

Title S  
Name JOHNSON WHALEY, BRENDA  
Address 4202 CHARLTON CREEK CT.  
City-State-Zip: JACKSONVILLE FL 32223

Title T  
Name SEALEY, SAMANTHA  
Address 7501 ULMERTON RD., APT. 1224  
City-State-Zip: LARGO FL 33771

Title ED  
Name MAROLT, AMIKCO  
Address 10667 BRIGHTMAN BLVD.  
8303  
City-State-Zip: JACKSONVILLE FL 32246

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** AMIKCO MAROLT

**EXECUTIVE DIRECTOR**

**06/07/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date