

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

Amendment

DOCUMENT # 839466
1. Entity Name

Pining Corporation

FILED

03 DEC 23 PM 12: 55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
151 SE 15 Rd.

3. Mailing Address
151 SE 15 Rd.

Suite, Apt. #, etc.
402

Suite, Apt. #, etc.
402

City & State
Miami, FL

City & State
Miami, FL

4. FEI Number
321136043

Applied For
Not Applicable

Zip
33129

Country
33129

Country

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

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
GUSTAVO A. Morales Mejia

Street Address (P.O. Box Number is Not Acceptable)

151 SE 15 Rd. #402

City Miami FL Zip Code 33129

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.

SIGNATURE *[Signature]*

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE (P/SITD)
NAME GUSTAVO A. Morales Mejia
STREET ADDRESS 151 SE 15 Rd. # 402
CITY-ST-ZIP Miami, FL 33129

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
000024436610
12/23/03--01024--017 **26.25

TITLE (VID)
NAME Angela Caicedo Toro
STREET ADDRESS 151 SE 15 Rd. #402
CITY-ST-ZIP Miami, FL 33129

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
000024436610
11/14/03--01013--021 **105.00

TITLE (D)
NAME Sebastian Alvarez
STREET ADDRESS 151 SE 15 Rd. # 402
CITY-ST-ZIP Miami, FL 33129

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
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13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

11/16/03 13:25:00



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

November 14, 2003

Express Corporate Filing Service Inc.
1000 Ponce De Leon Blvd.
Suite 101
Coral Gables, FL 33134

SUBJECT: PINING CORPORATION
Ref. Number: 839466

We have received your document for PINING CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You will need to file an amended UBR to change the officers instead of articles of amendment since your corporation is a foreign (out of the country) corporation.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey
Document Specialist

Letter Number: 003A00062094

RECEIVED
03 DEC 23 AM 10:52
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

EXPRESS CORPORATE FILING SERVICE INC.

Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101

Address

CORAL GABLES, FL 33134 (305) 444-4994

City/State/Zip

Phone #

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Pining Corporation
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- Walk in Pick up time _____ Certified Copy
 Mail out Will wait Photocopy Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment <u>Annual Report</u>
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials