

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003531

Entity Name: PINNACLECHOICE, INC.

FILED  
Jun 15, 2009  
Secretary of State

## Current Principal Place of Business:

632 POMPTON AVENUE  
CEDAR GROVE, NJ 07009

## New Principal Place of Business:

82 BLOOMFIELD AVENUE  
PINE BROOK, NJ 07058

## Current Mailing Address:

632 POMPTON AVENUE  
CEDAR GROVE, NJ 07009

## New Mailing Address:

82 BLOOMFIELD AVENUE  
PINE BROOK, NJ 07058

FEI Number: 32-0021714

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER  
P.O. BOX 6200 32314-6200  
200 E. GAINES ST.  
TALLAHASSEE, FL 32399 US

## Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: CARADIMITROPOULOU, MICHAEL E  
Address: 632 POMPTON AVENUE  
City-St-Zip: CEDAR GROVE, NJ 07009

Title: T ( ) Delete  
Name: ADAMSBAUM, KAREN  
Address: 632 POMPTON AVENUE  
City-St-Zip: CEDAR GROVE, NJ 07009

Title: P ( ) Delete  
Name: KOLBE, HARRY  
Address: 632 POMPTON AVENUE  
City-St-Zip: CEDAR GROVE, NJ 07009

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: CARADIMITROPOULOU, MICHAEL E  
Address: 82 BLOOMFIELD AVENUE  
City-St-Zip: PINE BROOK, NJ 07058

Title: T (X) Change ( ) Addition  
Name: ADAMSBAUM, KAREN  
Address: 82 BLOOMFIELD AVENUE  
City-St-Zip: PINE BROOK, NJ 07058

Title: P (X) Change ( ) Addition  
Name: KOLBE, HARRY  
Address: 82 BLOOMFIELD AVENUE  
City-St-Zip: PINE BROOK, NJ 07058

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

SIGNATURE: KAREN ADAMSBAUM

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06/15/2009

Electronic Signature of Signing Officer or Director

Date