

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K25382

FILED  
Apr 08, 2011  
Secretary of State

Entity Name: PINES RANCH INC.

**Current Principal Place of Business:**

3301 PONCE DE LEON BLVD  
PENTHOUSE  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

3301 PONCE DE LEON BLVD  
PENTHOUSE  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 65-0188079

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PINES, RICARDO DR.  
3301 PONCE DE LEON BLVD  
PH SUITE  
CORAL GABLES, FL 33134 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: PINES, RICARDO DR  
Address: 3301 PONCE DE LEON BLVD.  
City-St-Zip: CORAL GABLES, FL 33156

Title: SECD  
Name: PINES, GUSTAVO A  
Address: 3301 PONCE DE LEON BLVD.,  
City-St-Zip: CORAL GABLES, FL 33134

Title: DVP  
Name: PINES, EDUARDO I  
Address: 3301 PONCE DE LEON BLVD.  
City-St-Zip: CORAL GABLES, FL 33134

Title: DVP  
Name: PINES, FRANCISCO J  
Address: 3301 PONCE DE LEON BLVD.,  
City-St-Zip: CORAL GABLES, FL 33134

Title: SD  
Name: PINES, ELBA  
Address: 3301 PONCE DE LEON BLVD.  
City-St-Zip: CORAL GABLES, FL 33134

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

SIGNATURE: RICARDO PINES

PRES

04/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date