

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010373

FILED
Aug 08, 2008
Secretary of State

Entity Name: PINK H. FOUNDATION, INC.

Current Principal Place of Business:

7494 WEST 30TH AVENUE
HIALEAH, FL 33018

New Principal Place of Business:

Current Mailing Address:

7494 WEST 30TH AVENUE
HIALEAH, FL 33018

New Mailing Address:

FEI Number: 20-3606512 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PERDOMO, FRANCY E VP
7494 W. 30TH AVE.
HIALEAH, FL 33018 US

Name and Address of New Registered Agent:

PERDOMO, FRANCY E T
7494 W. 30TH AVE.
HIALEAH, FL 33018 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: FRANCY E. PERDOMO

08/08/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RIVAS, HAROL
Address: 7494 WEST 30TH AVENUE
City-St-Zip: HIALEAH, FL 33018

Title: VP () Delete
Name: PERDOMO, FRANCY
Address: 7494 WEST 30TH AVENUE
City-St-Zip: HIALEAH, FL 33018

Title: T () Delete
Name: PERDOMO, FRANCY
Address: 7494 WEST 30TH AVENUE
City-St-Zip: HIALEAH, FL 33018

Title: S () Delete
Name: PERDOMO, FRANCY
Address: 7494 WEST 30TH AVENUE
City-St-Zip: HIALEAH, FL 33018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: ADAMES, FRAILA E VP
Address: 1214 NW 137 TR
City-St-Zip: PEMBROKE PINES, FL 33028

Title: T (X) Change () Addition
Name: PERDOMO, FRANCY E
Address: 7494 WEST 30TH AVENUE
City-St-Zip: HIALEAH, FL 33018

Title: S (X) Change () Addition
Name: ALFONSO, NORMA
Address: 51 W 63 ST
City-St-Zip: HIALEAH, FL 33012

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

SIGNATURE: HAROL RIVAS

P

08/08/2008

Electronic Signature of Signing Officer or Director

Date