

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000099052

FILED  
Apr 19, 2004  
Secretary of State

Entity Name: PINASSE, INC.

**Current Principal Place of Business:**

1000 NORTH BROADWALK  
HOLLYWOOD, FL 33019

**New Principal Place of Business:**

**Current Mailing Address:**

1000 NORTH BROADWALK  
HOLLYWOOD, FL 33019

**New Mailing Address:**

FEI Number: 65-1149822      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MOYAL, PATRICK R  
208 NUNIVERSITY DR  
PEMBROKE PINES, FL 33024      US

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

BARNAGAUD, KATHLEEN A  
1000 NORTH BROADWALK  
HOLLYWOOD, FL 33019      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: BARNAGAUD KATHLEEN      04/19/2004  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: CHAUMES, FRANCK  
Address: 19777 E.COUNTRY CLUB DR. #527  
City-St-Zip: AVENTURA, FL 33180

Title: D      ( ) Delete  
Name: CLAMENS, THOMAS  
Address: 9 ISLAND AVENUE #2408  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD      (X) Change ( ) Addition  
Name: BARNAGAUD-KAINE, KATHLEEN A  
Address: 301 SE 6 TH AVE  
City-St-Zip: POMPANO BEACH, FL 33060

Title: D      (X) Change ( ) Addition  
Name: BARNAGAUD, BRUNO P  
Address: 301 SE 6 TH AVE  
City-St-Zip: POMPANO BEACH, FL 33060

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BARNAGAUD-KAINE KATHLEEN      PD      04/19/2004  
Electronic Signature of Signing Officer or Director      Date