2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000023826

1. Entity Name

PIKANTE CORPORATION

FILED
May 05, 2008 08:00 AN
Secretary of State

Principal Place of Business

SIGNATURE:

5201 BLUE LAGOON DR., SUITE 100 MIAMI, FL 33126

Mailing Address

P. O. BOX 802602 AVENTURA, FL 33280



DO NOT WRITE IN THIS SPACE

04192008 No Chg-P CR2E034 (11/05)

4. FEI Number 56-2325695

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DAVIS, STEVEN M ESQ. 5201 BLUE LAGOON DR., SUITE 100 MIAMI, FL 33126

DO NOT WRITE IN THIS SPACE

80-0s.

Daytime Phone 4

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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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and trile if applicable. (NOTE: Registered Agent and trile if applicable.				required when reinstating)	DATE
FILE NOW!!! FEE 18 \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Fina Trust Fund Contribution			cing	\$5.00 May Be Added to Fees	U00000948893 06/03/08-80007-802 150.00
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NORMAN, YEHUDA P. O. BOX 802602 AVENTURA, FL 33280				
TITLE NAME STREET ADDRESS GITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-S7-ZIP				DO	NOT WRITE
TITLE NAME STREET ADORESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	•				
TITLE NAME STREET ADORESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					

TURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR