

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2007 8:00 am
Secretary of State

02-16-2007 90030 017 ***158.75

DOCUMENT # P04000077619
 1. Entity Name
 LOS PINOS TINTORERIA, INC.



Principal Place of Business
 4222 W 16TH AVE
 HIALEAH, FL 33012

Mailing Address
 4222 W 16TH AVE
 HIALEAH, FL 33012

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number
 30-0257766

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

01172007 Chg-P CR2E034 (12/06)



6. Name and Address of Current Registered Agent
 RODRIGUEZ, MAYRA
 4222 W 16TH AVE
 HIALEAH, FL 33012

7. Name and Address of New Registered Agent
 Name: ORLANDO RODRIGUEZ
 Street Address (P.O. Box Number is Not Acceptable): 4222 W. 16 Ave.
 City: Hialeah FL Zip Code: 33012

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: ORLANDO RODRIGUEZ DIRECTOR DATE: 1-17-07

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ, MAYRA 372 W 64TH TERR HIALEAH, FL 33012 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ORLANDO RODRIGUEZ 12901 S.W. 15 CT. #210 Pembroke Pines, FL 33027 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: *Orlando Rodriguez* ORLANDO RODRIGUEZ DATE: 1-17-07 DAYTIME PHONE #: 3055575525