2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# P04000132955

Entity Name: PINCH ME, INC.

Current Principal Place of Business:

9514 SHADOW LANE
FORT PIERCE, FL 34951

New Principal Place of Business:

Current Mailing Address:

9514 SHADOW LANE
FORT PIERCE, FL 34951

New Mailing Address:

PO BOX 7127
PORT ST LUCIE, FL 34953

FEI Number: 20-1723348 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DELAPORTE, FRANK
9514 SHADOW LANE
FORT PIERCE, FL 34951 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: FRANK, DELAPORTE
Address: 9514 SHADOW LANE
City-St-Zip: FORT PIERCE, FL 34951

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

SIGNATURE: FRANK DELAPORTE (DECEASED AGEN 04/30/2008
Electronic Signature of Signing Officer or Director Date