


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 05, 2007 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # P04000151335 1. Entity Name TINTORER CORP. |  |
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|--|--|
| Principal Place of Business 2485 W FLAGLER STREET STE #3 MIAMI, FL 33166 | Mailing Address 2485 W FLAGLER STREET STE #3 MIAMI, FL 33166 |
|--|--|

DO NOT WRITE IN THIS SPACE



02142007 No Chg-P CR2E034 (11/05)

| | |
|---|--|
| 4. FEI Number 59-3792041 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

**AMORES, CARIDAD ESQ
294 WESTWARD DR
MIAMI SPRING, FL 33166**

**DO NOT WRITE
IN THIS SPACE**

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 title if applicable (NOTE: Registered Agent signature required when reinstating)

| | | |
|---|---|---|
| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | 000000654271 03/13/07 80095 008 150.00 |
|---|---|---|

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PTS AGUIAR, MARIA D PTS 2485 W. FLAGLER STREET, SUITE #3 MIAMI, FL 33145 |
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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: x  **MARIA AGUIAR**
PRESIDENT **02/16/07** **(305) 541-2207**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #