## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 11, 2008 08:00 Al Secretary of State DOCUMENT # P05000090116 1. Entity Name PINK HAUSE, INC. Principal Place of Business Mailing Address 4851 WOOD POINTE WAY 18999 BISCAYNE BLVD SARASOTA, FL 34233 US STE 205 AVENTURA, FL 33180 US CR2E034 (11/05) 03282008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3047621 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LAI, ALAN DO NOT WRITE 4851 WOOD POINTE WAY SARASOTA, FL 34233 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) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 $\Box$ After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE LAI, ALAN NAME STREET ADDRESS 4851 WOOD POINTE WAY U00000891501 CITY-ST-ZIP SARASOTA, FL 34233 04/23/09-80028-001 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. Thereby certify that the information supplied with this filling 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:

NAME STREET ADORESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED