

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000093128

Entity Name: PURE ENTERPRISES, INC.

FILED
Apr 04, 2008
Secretary of State

Current Principal Place of Business:

800 W. CYPRESS CREEK ROAD
SUITE 465
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

800 W. CYPRESS CREEK ROAD
SUITE 465
FT. LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 20-5265803

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEGAL, LARRY
800 W. CYPRESS CREEK ROAD
SUITE 470
FT. LAUDERDALE, FL 33309 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: D () Delete
Name: SAFINA, JOSEPH
Address: 9 FIESTA WAY
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: D () Delete
Name: KMASTER, HOWARD
Address: 2321 DEER CREEK TRAIL
City-St-Zip: DEERFIELD BEACH, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: KMASTER HOWARD

D

04/04/2008

Electronic Signature of Signing Officer or Director

Date