

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000037453

FILED
May 01, 2009
Secretary of State

Entity Name: PURE PINK, INC.

Current Principal Place of Business:

2617 BROOKVILLE DRIVE
VALRICO, FL 33594

New Principal Place of Business:

8148 BRINEGAR CIRCLE
TAMPA, FL 33647

Current Mailing Address:

2617 BROOKVILLE DRIVE
VALRICO, FL 33594

New Mailing Address:

8148 BRINEGAR CIRCLE
TAMPA, FL 33647

FEI Number: 20-8737757

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WORLDS, NICHOLAS
2617 BROOKVILLE DRIVE
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

WORLDS, NICHOLAS
8148 BRINEGAR CIRCLE
TAMPA, FL 33647 US

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: NICHOLAS WORLDS

05/01/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: HALPIN, JULIANNE
Address: 2617 BROOKVILLE DRIVE
City-St-Zip: VALRICO, FL 33594

Title: VPS () Delete
Name: HALPIN, JULIANNE
Address: 2617 BROOKVILLE DRIVE
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: HALPIN, JULIANNE
Address: 8148 BRINEGAR CIRCLE
City-St-Zip: TAMPA, FL 33647

Title: VPS (X) Change () Addition
Name: HALPIN, JULIANNE
Address: 8148 BRINEGAR CIRCLE
City-St-Zip: TAMPA, FL 33647

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: JULIANNE HALPIN

PT

05/01/2009

Electronic Signature of Signing Officer or Director

Date