

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000114183

FILED
Sep 19, 2008
Secretary of State

Entity Name: TOO FUNKY CORPORATION

Current Principal Place of Business:

COCOWALK SHOPPING CENTER
3015 GRAND AVE, UNIT 170
COCONUT GROVE, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

COCOWALK SHOPPING CENTER
3015 GRAND AVE, UNIT 170
COCONUT GROVE, FL 33133 US

New Mailing Address:

FEI Number: 26-1302391 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARBESINI, KARINA L
600 NW 32ND PL
318
MIAMI, FL 33125 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

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: P () Delete
Name: BARBESINI, KARINA L
Address: 600 NW 32ND PL APT 318
City-St-Zip: MIAMI, FL 33125 US

Title: VP () Delete
Name: BENITEZ, MARCELO R
Address: 600 NW 32ND PL APT 318
City-St-Zip: MIAMI, FL 33125 US

Title: S (X) Delete
Name: FERNANDEZ, MABEL
Address: 3015 GRAND AVE - STE. 170
City-St-Zip: COCONUT GROVE, FL 33133 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: KARINA L. BARBESINI

P

09/19/2008

Electronic Signature of Signing Officer or Director

_____ Date